

# A Theory of Compassion Development

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This paper should be considered a work in progress and is the result of tens of years examining the nature of suffering in our society, and how we face this. Thousands of pages of previous writings by this author underline the components of this theory, yet the theory is very simple in its construction. From one point of view compassion is easy to define: the willingness to reduce suffering. But a closer examination of the literature, biographies, research papers, and common experience indicate that the matter is a bit more complex. There appears to be a broad range of phenomena that fall under the term compassion.

Most of us know from our experiences that some people appear to demonstrate more compassion than others. If we haven't recognized this then we most assuredly have recognized that there are those who act with less compassion, and we have personally met them. This, in a reverse logical way, also means there are those people who show more compassion than others. We may not have been fortunate to personally met people with well developed compassion, but we may still agree with the premise that compassion is not equally distributed throughout the population.

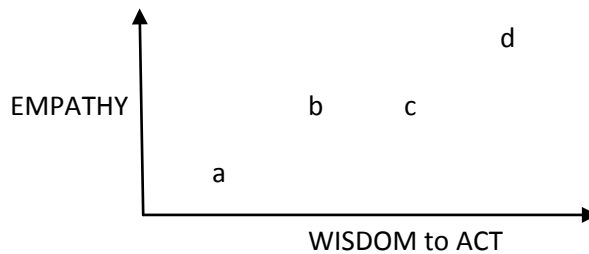
It is also likely that we know of compassion heroes, such as Gandhi, Martin Luther King Jr., Jesus Christ, Mother Theresa, and the Dalai Lama. We can add to this list saints, mystics and skilled healers (as I have suggested in my other writings). We may or we may not know the nature of the compassion these heroes speak of, but most of us know that they have lived and died for such a message. They spoke of a **compassion space** that we can share with others. They spoke of advanced levels of compassion that are potentially available to us. We may not know the nature of these advanced levels but most of us do know that the message has been here for centuries, and continues to be spoken today. It is a message that speaks to us of levels of compassion yet to be developed in the general populace, of a way to shift to a culture of compassion through experiences within the compassion space.

Preliminary research that comes from our basic compassion survey, and our theoretical research (see information on [www.CompassionSpace.com](http://www.CompassionSpace.com)), supports the idea that people define compassion in different ways. The survey information also supports the idea that compassion is a relational phenomenon. It is expressed through the ACTIONS that people demonstrate in relationship with other sentient beings as part of their willingness to reduce suffering. One can have empathy without compassion, meaning one can feel the suffering of another without doing anything. Some people defined compassion this way and some feared that "too much compassion" could lead to what is incorrectly called "compassion fatigue". People were asked to describe traits of compassionate people. They did not say "they sat and thought in a compassionate way". Instead they spoke of compassion as having an action component. When people think of compassion heroes they think of people who acted

in ways that showed compassion towards others. How would we know if someone was compassionate unless there was action or the observed effects?

### The Basic Components of the Theory of Compassion Development

Compassion can be defined as having two basic parts; 1) hearing the suffering of another (empathy) and 2) acting with wisdom in some way to reduce that suffering. Using this definition the development of compassion can be simply represented using the following graph:



**Figure 1:** Graph of Empathy versus Wisdom Showing a Few Compassion Phenomena

The vertical axis represents increasing empathy, or increasing the ability to hear suffering. The horizontal axis represents an increase in the wisdom to act for reducing suffering.

On the graph above there are four letters, a through d. These letters represent various points of compassion development. At point “a” the person has developed some empathy (some listening skills to hear suffering) and some wisdom (some ability to act to reduce suffering). At point “b” the person has more developed empathy and more developed wisdom. At point “c” the person has the same level of empathy development as at point “b” but has developed more wisdom (more experience in helping to reduce suffering). At point “d” the person has both advanced levels of empathy and advanced levels of wisdom. These four letters represent only the basic conceptual compassion phenomena.

These four letters represent only the basic possibilities of compassion development, and they mirror common sense. First a person could have low levels of empathy development and/or low levels of wisdom development. This would be a person who appears to lack the sensitivity to hear the needs of others except on the rare occasion. Second a person could have moderate levels of empathy development and moderate levels of wisdom development. Third a person could have moderate levels of empathy development and higher levels of wisdom development. This idea that wisdom in the practice of reducing suffering can develop while empathy development remains constant is important as it may be reflected in the working definitions of compassion spread across the human service profession, philanthropic organizations and religious communities. It is the work done in deeds without the accompanying work on connection through empathy. Finally, a person may develop both advanced empathy and advanced skills in helping people reduce their suffering. They demonstrate advanced compassion phenomena and have been the topic of this author’s research. These people are few, but they have quite a bit to show us about developing and strengthening compassion.

What this simple diagram illustrates is the common sense idea that within the broad population people share, and experience, the compassion space in different ways depending on their empathy and their wisdom.

More Complex Components of the Theory of Compassion Development

Based on my earlier research on advanced levels of empathy (“The Healing Relationship”), and other research done on the development of expertise (wisdom to act), the above graph can be shown as the following table:

**Figure 2:** Chart of Empathy versus Wisdom Including Possible Compassion Phenomena

	<i>Wisdom</i>					
<i>Empathy</i>	Pre-Novice	Novice	Advanced Beginner	Competence	Proficiency	Expertise
Halopathy						d
Advanced						
Skilled	x			b	c	
Subtle						
Basic			a			
Instinctual	z			y		

The points labeled “a” through “d” on the graph above are now shown in the table. These four points are meant to serve only as examples of the possible range of compassion phenomena.

It is possible that all 36 spaces in the above table could be represented by some portion of the way we define and experience compassion. Descriptive terms like gut feeling, sympathy, basic listening skills, altruism, helping/giving, strong (or courageous) compassion, cooperation, and radiant compassion could all be put on this table at different places. At this point there is not enough research available to develop a complete description of the range of compassion phenomena. But it is possible to speculate on a few possibilities that might make common sense. At point “x” the person has well developed empathy, very sensitive to hearing the suffering of others, but has little experience in helping people move from suffering into well being. This can lead to feeling quite helpless. Point “y” is nearly the opposite. The person has been practicing helping people (giving, doing) who are suffering, but has not developed empathy. This person does things, deeds that are aimed at reducing suffering – like sending money to a charity. Point “z” might represent someone we may have encountered in our lives. This is a person who has not developed their empathy much, nor their wisdom regarding helping others with suffering. This person has difficulty listening to others and lives mostly within a sphere of self concern. A diagram at the end of this paper extrapolates on these basic ideas, taking a daring leap in offering a possible presentation of how the range of compassion phenomena might fall within the empathy/wisdom axes.

### What Does This Theory Mean for Defining the Term Compassion?

Basically this theory proposes that the term compassion represents a spectrum of phenomena experienced within the compassion space. Any proposed theory should predict observed phenomena in the real world. Some of the common sense examples given above suggest that this theory might be able to predict that people develop compassion in different ways and yet all use the word compassion to describe their efforts. The theory suggests that compassion is developed through both empathy and wisdom, but that people can develop along these two components at different rates. It is not likely that society will develop 36 different words to describe the various developmental forms compassion might assume, but using this theory it might be possible to look at a “portrait” of the most common compassion phenomena. This portrait is shown in a diagram at the end of this paper. Such a portrait might help us move more toward a culture of compassion by 1) helping us to better define the term compassion, 2) design better research, 3) pointing out a direction to take toward stronger compassion and 4) help with teaching others develop their compassion.

One of the most significant aspects of this theory is that each person, no matter where they are on the compassion phenomena diagram, has the potential to improve. But one immediately faces the problem of accepting the idea of compassion improvement, of accepting the idea that your definition, your understanding and your practice of compassion is framed by your current developmental progress. This is sort of a catch-22 because you can only understand compassion from your current developmental level and you can't fully understand compassion that occurs at an advanced developmental level until you experience it. So your perspective on compassion is shaped by your definition of compassion which in turn shapes how you experience compassion. Yet having an open mind to the possibility of a broad range of compassion phenomena (also termed compassion readiness), will help prepare you for compassion growth.

Compassion is a relational phenomenon experienced within the compassion space, not simply a meditative mind set. Meditation is useful to compassion in many ways that are beyond the scope of this paper, but its practice should not be confused with the relational practice of genuine compassion. This idea of “relational phenomenon” means that we must exist in a relationship with ourselves, someone, or a community, with a combination of empathy and wisdom, to experience genuine compassion.

If you combine the key points of the Theory of Compassion Development with the concept that compassion is relational then it is through compassionate relationships, the compassion space, that we can “pass it on”. We develop our awareness, definition and practice, of compassion through our experiences in the compassion space. It is by passing it on that we help others experience levels of compassion beyond their current compassion awareness – provided that circumstances are suitable for such to occur. Then they can pass what they have now learned on to others. But it is also important to help people to be ready to experience levels of compassion beyond their current awareness. This is where compassion discourse, giving compassion a strong voice, becomes important. These are three ways we can move toward a culture of compassion – 1) through discourse that prepares and supports, 2) through the sharing of direct experience within the compassion space and 3) helping people to remove the barriers to compassion readiness. These three paths are represented by three types of

relationships (see [http://compassionspace.com/Helping\\_Relationship\\_Tree\\_and\\_C.html](http://compassionspace.com/Helping_Relationship_Tree_and_C.html)) within the compassion space. Underlying the concept of the compassion space is a set of assumptions within a philosophy of compassion.

This theory supports the 7 basic assumptions of compassion proposed on [www.CompassionSpace.com](http://www.CompassionSpace.com). This is a theory and not yet supported by empirical research (although there is other evidence given in this author's writings as support). The assumptions are also not yet supported by empirical research, although bits and pieces of research are appearing. Yet both the theory and the assumptions point out directions research can take to help us expand our knowledge and discourse about compassion.

This paper does not address all the possible factors that could contribute to a person's compassion readiness – or their openness to experiencing the compassion space at levels beyond their current level of knowledge. This includes a wide range of interacting dynamic factors ranging from culture to heredity, to family, training, compassion experiences, divine influence and personal experiences with suffering. How these all interact and relate to the development of compassion remains a topic for further discussion once the construct of compassion has been better defined. This is one of the central goals of this paper and other writings by this author – to more clearly define compassion and the range of developmental experiences people associate with the term. **Once we have better clarified how we define compassion then we can move forward to examining the factors that influence its development and its practice.** We can then move forward with greater wisdom toward a culture of compassion.

The main focus of our first survey on [www.CompassionSpace.com](http://www.CompassionSpace.com) was to explore the possibility that people do define compassion in different ways and that there might be groupings in these definitions. We also asked people to define people who displayed compassion as more support for their views on compassion. The survey included demographic information so that we could separate the definitions into different groups and see if there were any differences? Do men show any differences from women? Do people with decades of experience show any differences from people with little professional experience? We do expect to publish the results of this survey and hopefully it will advance our understanding of the term compassion.

Our basic assumption was that the information would support common sense – people have different definitions of compassion. In doing quality research on compassion it is important to have a complete construct definition. The first step we discovered is that the definition of compassion needs to be improved from what is commonly published (like that often quoted dictionary definition). What we needed was a definition that more closely represented the construct of compassion as it is understood by the general public. If compassion research is to be broadly applied to the public then it should fit with how the public generally understands compassion.

What is proposed here is that the use of the term compassion covers a spectrum of phenomena that are used throughout society in how compassion is defined and practiced. This is the basic assumption of the Theory of Compassion Development and illustrated in Figures 3 and 4.

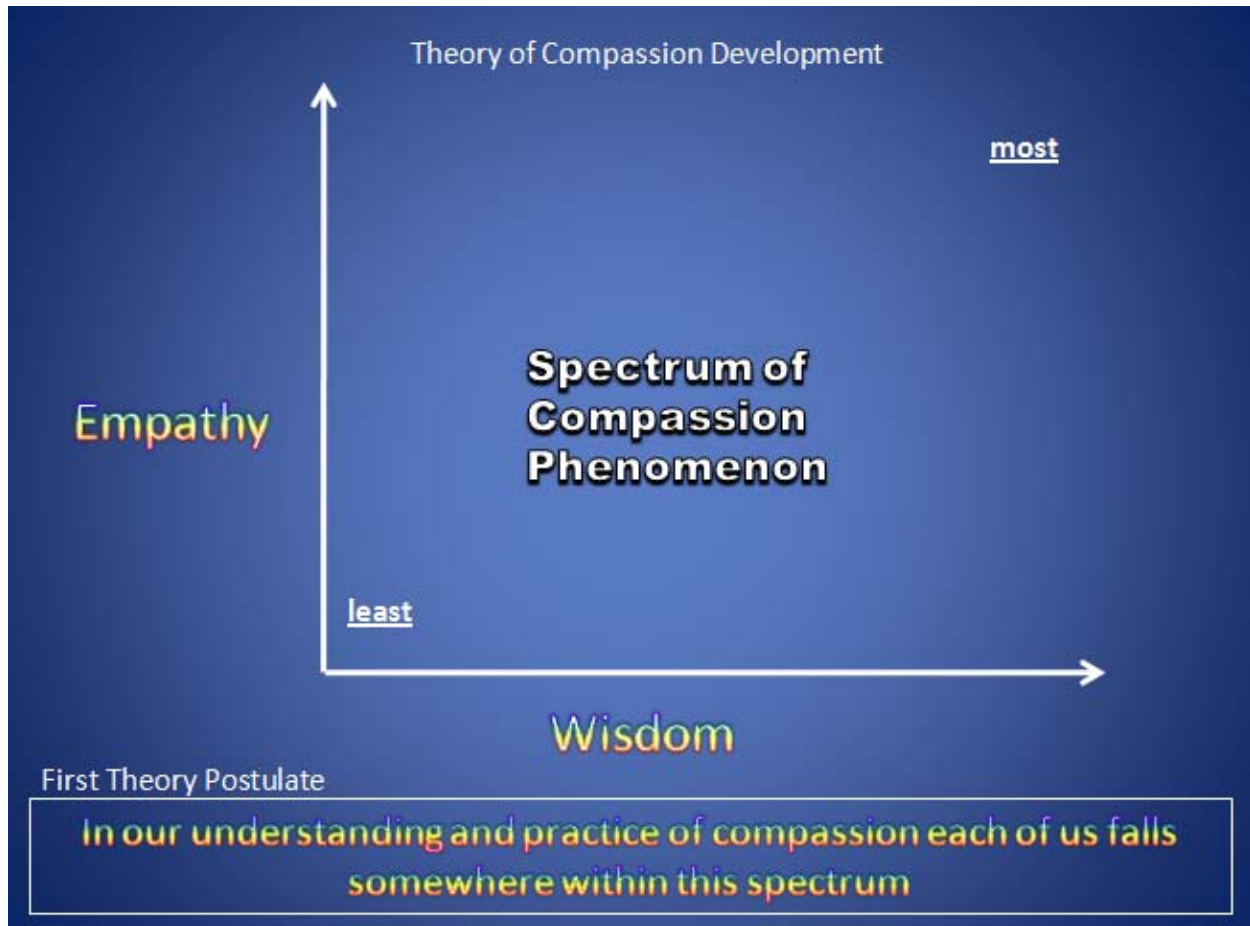
**Figure 3:** The Theory of Compassion Development – Spectrum of Phenomena

Figure 3 shows a diagram with increasing empathy on the vertical axis and increasing wisdom on the horizontal. It is proposed that compassion is the ability to hear (empathy) suffering (your own and others) and then to respond to empathy in some way that aims to reduce the suffering (wisdom). Before we can get into a discussion about any thoughtful research done on compassion (and by the way there really isn't that much done) we have to agree on what the term means (called construct definition). As a collective we have not yet reached consensus on the definition. This is the first theory postulate of the theory of compassion development: In our understanding and practice of compassion each of us falls somewhere within the spectrum of compassion phenomena. Our definition of compassion is shaped by the experiences we have within this spectrum.

There are some academic folks looking at both compassion and altruism from a sociobiological perspective. I have made some of this information available on the website [www.CompassionSpace.com](http://www.CompassionSpace.com). In summary it is proposed that compassion is a genuine positive human characteristic tied to the survival of the "tribe", much in the same way that nurturing is. Compassion can also be practiced and developed (as can nurturing) beyond the level of instinct, and thus be of more benefit to the well-being of the collective. The obvious question then comes, "Are we acting for the benefit of the collective to serve our own needs?" Do we nurture our children because of selfish needs? Do we help those who are in

distress because of our own needs? Or maybe compassion is a virtue that is not linked to selfish motives.

Consider the following: A young man is driving down the road and sees a car veer off and into a lake. He stops, and sees a woman trapped inside. The car is sinking. He gets out of his car, runs, dives into the water and rescues the woman. Consider also those people who acted as “rescuers” for Jews during WWII. Are these people acting from a place of self-centered gratification. The research on people who show compassion, altruism and heroism suggests that there is little or no thought of self during these acts. The man who rescued the woman from the car did not stop to think, “Is this in my best interest to do this?”

Empathy is simply the ability to hear the suffering of other with the intent to promote well being. Without that intent the listening becomes something else, like interviewing, manipulation or brainwashing. The majority of humans have at least a basic instinctual development of empathy, such as have a response to seeing an innocent person being tortured or hearing the cries of a child. Such a basic ability may have been necessary to the survival of “the tribe” and part of human heritage, but empathy can be seen as more than instinct. It is common sense that some people seem to be more sensitive to the feelings of others. Empathy can be seen as having a broad developmental scope, as described in my book “The Healing Relationship” and expanded upon further in the two books “The Mystic Relationship” and “The Ultimate Relationship”. But empathy alone is not the same as compassion. Compassion includes a response to what is heard with empathy. The developmental range of this response can be considered to be governed by wisdom.

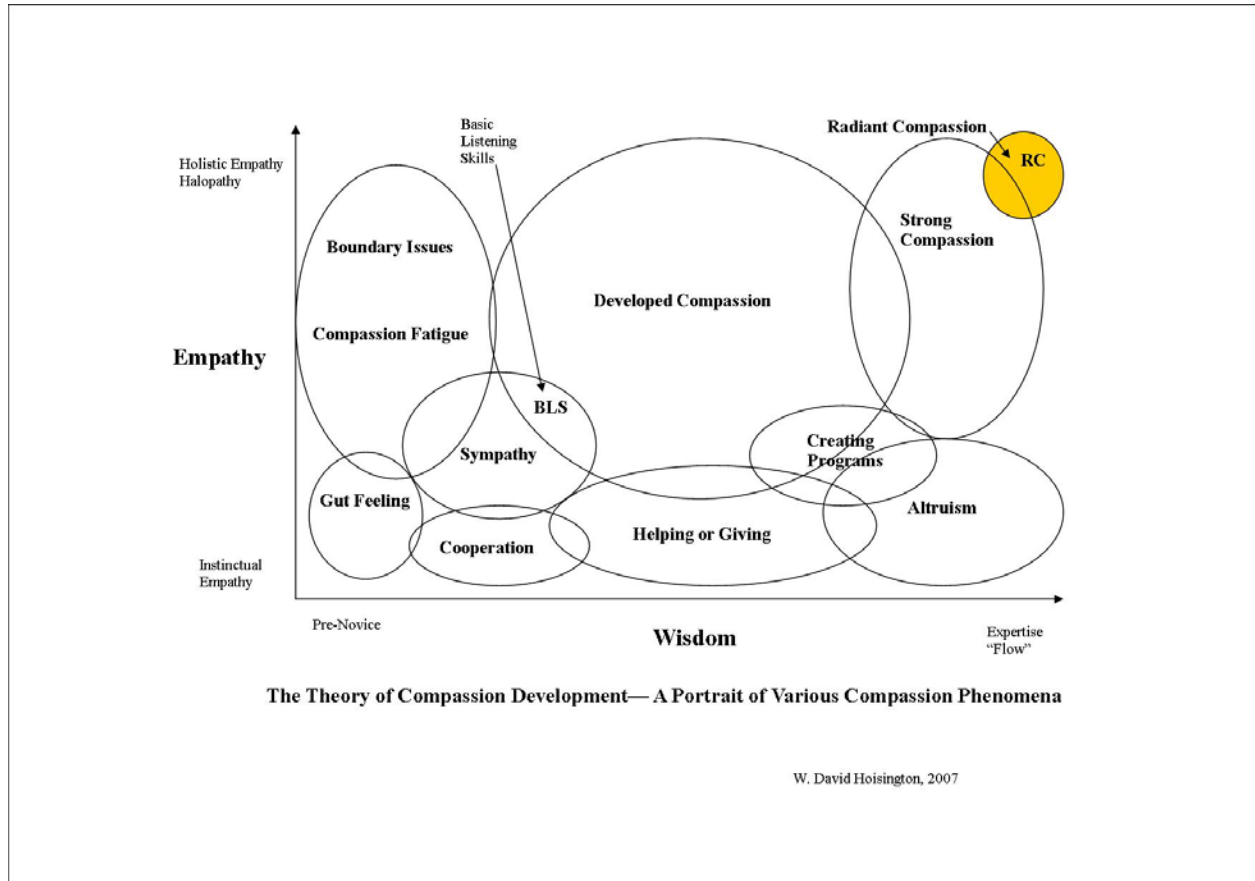
The concept of wisdom is one that can be applied within a domain. This follows along the theory of multiple intelligences and brain plasticity. It also is supported by the study of prodigies - who often show proficiency in a given domain (like music). Wisdom is, like many virtue constructs, open to interpretation, but in the case of the domain of compassion the term has specific applications. This is true whenever you apply the term wisdom to any domain. In this case the term wisdom is applied to the domain of compassion, or helping self and others with the relief of suffering.

#### A Portrait of Various Compassion Phenomena

Figure 4 should be considered as a “work-in-progress”. A wide range of compassion related phenomena are represented on the diagram within a field of increasing empathy (ability to hear suffering) and increasing wisdom (a response to empathy exhibited as way to reduce suffering). At the lower left is **gut feeling** and it is assumed to be an instinctual level response accompanied by no action or limited action. Following along the axis of wisdom (or the path of action), with little increase in empathy, the next phenomena is **cooperation**, followed by **helping or giving** and then **altruism**. This proposes the somewhat commonsense idea that people can provide help, at various levels of expertise, without well developed empathy and still have the phenomena fall within the domain of compassion. Such developmental progression is similar to the scheme proposed by Denis Krebs and Frank van Hesteren

(1992, cited in Samuel P. Oliner’s book “Do Unto Others”). This developmental path is also similar to some recent work done by Rappagay and Erdynast (paper sent to this author, Nov 19 2007 which is to be printed in the Journal of Adult Development). Next, following up the axis of empathy (from gut feeling), without an increase in wisdom is the phenomena of **compassion fatigue** followed by **boundary issues**.

**Figure 4:** Theory of Compassion Development -Speculative Location of Compassion Phenomena



This proposes that if empathy is well developed without the wisdom to act then there are associated phenomena that fall within the realm of compassion – meaning that the person is feeling compassionate but doesn’t have any options for making a difference in the suffering. Finally, when BOTH empathy and wisdom are developed together, the sequence of phenomena proposed (moving out from gut feelings) are **sympathy, developed compassion, strong compassion,** and finally **radiant compassion**. This developmental path to radiant compassion phenomena, and teaching to promote such development, has been the main focus of this author’s research.

The area covered by the phenomena **developed compassion** is the largest of the diagram to represent the possible wide variation of how people define and understand developed compassion – from basic

developed compassion, using **basic listening skills**, to more well developed compassion. It is also likely that other terms like loving kindness, compassionate love, and being the “good Samaritan” may fall within this broad circle of developed compassion. More research may indicate a better delineation of developmental progress through this broad region of developed compassion.

One more compassion phenomenon has been added to the diagram – **creating programs**. This refers to those people with strong compassion who create new programs to help others, fighting through all the obstacles that are often present (like the work of Mother Theresa or Clara Barton).

The idea that compassion is a spectral phenomenon has been supported by the work of Erdynast, A. & Rapgay, L. (2008) in their article “Developmental levels of conceptions of compassion in ethical decision-making of Western Buddhist practitioners” in the Journal of Adult Development. The authors stated that their research of 140 subjects supported the “view of compassion as ‘levels of conception’ rather than as a singular state” (from their abstract). Preliminary results from our survey on how people define compassion also suggest that compassion should not be viewed as a singular state. This Theory of Compassion Development is offered as a model for discussion and is most definitely a work in progress. But it can be visualized as the foundation for all helping relationships. This is shown at the following link:

<http://www.compassionspace.com/HelpingRelationshipTree.html>

Please feel free to post comments on the community forum. Let us all work together to advance compassion in the world.

"The sage does nothing but nothing is left undone" - Lao Tsu