

CHAPTER 6

The Social Psychology of Compassion and Altruism

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This chapter marks a shift from the individual self-healing model of the Four Noble Truths to the social healing tradition of Universal Vehicle Buddhism, as formulated in Zen practice and in Indo-Tibetan compassion training. This great tradition of social healing offers a unique psychology of wise compassion and interpersonal effectiveness, based on the self-healing foundation of the Individual Vehicle or Theravada. In this chapter I will elucidate the essential principles that ground that tradition—the principles of interdependence and universal compassion—and explore how they can contribute to a new human ethos and practice for optimizing relationships and social systems.

Critical Thinking and the Emerging Science of Compassion

Scientific thinking has searched for empirical certainty. As a result, until the scientific basis of compassion recently came to light, science approached compassion with skepticism, and saw it as part of a religious attempt to identify “the good” in humanity. In the twenty-first century, however, science has begun to accept the key role cooperation has played in evolution, and to clarify the neural basis of social emotions like empathy and compassion. The last few decades have seen a surprising convergence between this new science and humanity’s timeless arts of cultivating compassion, especially focusing on practices widely used in Buddhist traditions informed by the Universal Vehicle. This convergence has helped to accelerate a shift long underway in modern psychology, from individual-centered models and methods towards interpersonal approaches centered around the relational, intersubjective dimension of human development and transformation.

Given how recent and dramatic this shift has been, popular consciousness and conventional wisdom are still far from recognizing its revolutionary potential. Compassion is often seen as a sentimental, religious ideal, but not a practical, scientifically grounded way of healing individuals, relationships, or society as a whole. All too often those of us who advocate the use of compassion in psychology, healthcare, or public policy are seen as “unscientific” and received with skepticism, especially at this time of uncertainty and global crisis. The men and women of this century have reached a point where their dreams of finding happiness through

material advancement seem increasingly unlikely and out of reach. Our world today is filled with insecurity, global competition, and volatility. As a species, we seem to have perfected countless ways and means to harm and terrorize one another, ways that reveal our base instincts. In our attempt to find security, we have resorted to military “solutions” to more and more global problems. To defend our financial and social interests, we have reverted to rigid boundaries based on religion, ethnicity, and nationality. Within our societies, communities, and families, we have fallen into divisive extremes of ideology, racial and gender identity, and narrow personal self-interest. In troubled times like these, how can anyone put much faith in humanity’s potential for compassion?

Empathy, Compassion, and Humanity’s Intrinsic Goodness

From a Buddhist perspective, within us all is a universal wish to be happy, and an innate goodness that is the natural basis for the realization of lasting happiness. In this view, one marker of our humanity is a natural capacity for empathy and compassion, which is seen as an essential and intrinsic part of our innate goodness. This optimistic perspective suggests that we not only want to be rid of what causes us pain, but through our empathic nature, we also have a natural tendency to care deeply about the suffering of others. Alas, we are also prone to an exaggerated egocentric position that can easily dominate psychic life, laying claims to what is “mine,” and leaving aside what is “ours.” In this egocentric mode, we easily find ways to justify narcissistically motivated negative actions. As we know from our study of the Buddha’s Four Noble Truths, Buddhism does not deny or minimize the hold such primitive self-protective instincts have on our minds and lives. As a result, learning to heal one’s own mind by disarming these instincts is considered to be a vital prerequisite to being able to practice healthy self-compassion, as well as real compassion for others.

Modern Psychology Turns to Buddhist Models and Methods

As modern science increasingly aligns with Buddhist thought in recognizing the psychosocial costs of these egocentric instincts, and the many benefits of social capacities of heart and mind, many of my colleagues have searched for effective methods to help their clients develop compassion. Since the hopeful findings of affective neuroscience and positive psychology have validated Buddhist views of our robust capacity for positive social emotions, more clinicians are turning to Buddhist methods of helping people access these deep reserves of empathic fellow feeling. In their search, many questions have arisen. How can we develop a model of compassion that is not limited to kin but oriented toward the larger community? How can we develop a practice of compassion that can be universally understood and applied? How can we develop a relational model of healing individual, family, and society, which can offer a foundation for a much needed secular ethics in the twenty-first century?

In his book *Ethics for the New Millennium*, the Dalai Lama offers just such a general model of healing based on a secular, scientific reading of the Buddhist understanding of nature and life as an infinite network of interdependence (Dalai Lama, 1999). This understanding lays the foundation for taking “personal responsibility” for one’s own health and happiness; and it also grounds our common search for well-being in the understanding that our personal happiness is inexorably linked to the happiness of all others. This understanding of interdependence lays the foundation for an ethos of universal responsibility that offers a model for the common happiness of all life on earth. As a contemplative psychologist, I have come to believe that we can make no greater contribution to the world than by training our minds in the meditative practice of compassion. If we seek to transform ourselves, this practice is indispensable; if we seek to transform others and our world, it is even more indispensable.

For those of us who want to be the most effective healers we can, I believe we must practice this path with scientific certainty, pragmatic secular commitment, and a compassionate human spirit. Of course, we all want to have more space to be reflective, contemplative, and to find peace of mind in the face of suffering. Today’s historic convergence of science and contemplation offers not only the promise of a boundless potential for compassion, but also the challenge that we must work diligently to overcome our egocentric habits and realize that potential. I remember the first time I heard the Dalai Lama’s challenge: “Compassion is not a luxury, but a necessity for the survival and well-being of our species” (Dalai Lama, 1999). Given that Buddhist contemplative science anticipated our new science of compassion and its benefits by many centuries, it also has had ample time to develop and refine systematic, effective, and reproducible methods of training compassion. These methods have been the subject of several promising recent studies of the brain effects and health benefits of compassion (Desbordes et al., 2012; Klimecki et al., 2013).

Challenging Myths and Fears of Compassion

Given the fact that empathy and compassion sensitize us to suffering, it is no wonder that the idea of cultivating these capacities runs up against fears of empathic burnout and compassion fatigue. Although these fears have been challenged by recent research, it turns out that they are not without some basis in the neuroscience of social emotions. Since the recent discovery of mirror neurons and their role in the empathy network, we have come to understand the mechanism of the “social contagion” of human emotion (Mardsen, 1998). Because our first instinctive reaction to seeing distressed facial expressions and body language is to trigger emotional memories that match the distress we see, our first unconscious form of empathy is a sympathetic reflex that dredges up aversive conditioning and traumatic reactivity (Singer & Klimecki, 2014). This explains why being compassionate is often consciously or unconsciously confused with being helplessly caught up in someone else’s unbearable suffering.

Some researchers like Tania Singer and Richard Davidson have borrowed a distinction made by Buddhist psychologists like Matthieu Ricard to explain this social emotional reactivity. That distinction is between genuine or wise compassion and sentimental or false compassion. The first involves a higher awareness and insight that does not confuse our suffering with that of others, and also engages the other's suffering with mature care rather than self-protective stress. The second refers to the kind of unconscious, confused perception of others' suffering through the lens of our own traumatic memories, one which instinctively reacts to suffering with a post-traumatic stress reaction that includes fight-flight-freeze-faint autonomic arousal. Some researchers have used the term "empathy" for this second, stress-reactive mode of social contagion. This contradicts the psychological use of that term to refer to a proactive faculty that correctly "feels into" another's experience. But whether we call it primitive empathy, reactive sympathy, or false compassion, such unconscious stress-reactivity to the suffering of others has been linked to the syndromes of "empathic burnout" and "compassion fatigue." These syndromes form the basis of the unexamined myths and fears that empathy and compassion always get us caught up in others' suffering and are somehow stressful, questionable, or even dangerous.

Research across disciplines has challenged these myths and fears, by showing how compassion training helps shift the neuropsychological processing of suffering from the reactive mode of sympathy to a proactive empathy or wise compassion. Researchers like Tania Singer and Richie Davidson, working with Buddhist researcher-practitioners like Joan Halifax and Matthieu Ricard, have laid the groundwork for understanding the power of training the mind and brain to respond to suffering in proactive ways, through cultivating the positive emotions of empathy, compassion, and altruism (Ricard, 2016). Extending their work, a second wave of researchers has replicated their early findings and refined reproducible methods of training compassion based on traditional Indo-Tibetan practices (Desbordes et al., 2012; Klimecki et al., 2013; Weng et al., 2013). This groundbreaking research has confirmed our natural ability to cultivate increased comfort and capacity to engage myriad forms of suffering—psychological, economic, social—and find effective ways to respond. It also lends scientific weight to the Dalai Lama's challenge for all of us to conceive of a society that privileges the importance of compassion, and fosters its development, as much as our current society privileges scientific and economic development.

The Healing Power of Wise Compassion: A Personal Story

My own personal experience of the healing shift from sympathetic burnout to wise compassion came as a result of an encounter I had with His Holiness the Dalai Lama in the late 1990s. For two decades prior to that meeting, I had been involved in international aid work, in places like Iraq and Afghanistan, where conflict had become part of the fabric of daily life. Over those years, I encountered thousands of refugees, ravaged by loss and displaced by war. I felt like I was living a schizophrenic life, with my outer world filled with the most horrendous forms of

suffering, while my inner world was nourished by an incredibly rich Buddhist meditative practice. Gradually the split made me feel more and more helpless, given how limited my power was to do anything major to impact the suffering I was witnessing. In the fall of 1998, I arrived in Dharamshala full of pain, and had already fallen into the conviction that my work was ineffectual. What felt worse was that, despite my best efforts, I could not improve the limited institutions for which I worked, or even get support from other activists who seemed caught in a struggle of mistrust and competition. I was suffering from empathic burnout, and through it all had come to feel truly helpless and hopeless.

In an interview I had with the Dalai Lama, I shared my frustrations and despair. Instead of falling into that state with me, His Holiness challenged me: “How do you think you would truly be more useful,” he asked, “by sending humanitarian aid or by teaching compassion?” Until that day, that moment, my meditation practice seemed like an intimate secret of my private life; it was in the closet. But the Dalai Lama’s skillful challenge suddenly seemed to reveal all my hidden potential. I understood in that moment that all I had been doing under the guise of helping others was descending into my own personal suffering. This form of help was what Buddhists call “useless,” “foolish,” or “sentimental” compassion. It really had nothing to do with righting a wrong, with my doing good deeds for others. What it had to do with was my sentimental fantasy of being a good person. While on one level that was perfectly fine, in fact my good intentions were not grounded enough in real understanding or wisdom about the root causes of human suffering, and how one human being can really help uproot suffering, her own or others’. What I needed, I realized, was the wise compassion that really transforms suffering at its roots.

Beyond simply challenging me to consider teaching compassion, given my training as a psychologist, the Dalai Lama shared his fascination with the science of compassion. Thanks to his work supporting research into the effects of meditation on the brain, His Holiness in fact has done more to raise awareness of the healing power of compassion than many other world figures. His interest and example inspired me to delve deeply into the emerging neuroscience of compassion, as well as into current methods of training it.

To some extent the surprising convergence of neuroscience and contemplation today represents the fruition of the pioneering vision of the exceptional philosopher-scientist Francisco Varela (Varela et al., 1992). Varela argued that a new science of mind was needed to bring together the findings of psychology and neuroscience. As central to that field, he advocated the birth of a new interdisciplinary field called “neuro-phenomenology.” He proposed that subjects trained in contemplative disciplines like mindfulness are more objective and accurate observers of their internal mind/body experience, and could work closely with neuroscientists to clarify the links between neural processing and human consciousness. The result would be at the heart of a multi-disciplinary science of mind as an embodied consciousness in a living nervous system within a sensitive human being.

In a sense, the groundbreaking work of the new contemplative neuroscience reflects the coming of age of Varela’s vision. Its pioneering neuroscientists also

happen to be meditators committed to collaborating with scientifically minded contemplative scholar-practitioners. In this volume and others like it, the same kind of interdisciplinary teamwork is being applied to the realms of psychotherapy, social psychology, and positive psychology. And, just as the first generation of contemplative neuroscience focused on mindfulness has given way to a second generation focused on compassion, early mindfulness-based psychology and psychotherapy is now giving way to models and methods based on the cultivation of compassion. This raises the larger question: why have both neuroscientists and clinicians become increasingly interested in cultivating compassion in recent years?

Growing Recognition of the Science and Benefits of Compassion

We have only lately become convinced that it is possible to train in emotional experience, to increase empathy, altruism, and compassion; and that such training promotes a greater resiliency for individuals that, in turn, affects the resilience of larger family and social systems. These growing recognitions reflect decades of research on the neural basis of empathy (Cozolino, 2006). More recently, researchers have shed light on the dramatic transition that occurs in the brain when our response to others' suffering shifts from reflex empathy or sympathy to compassion (Singer & Klimecki, 2014).

Basically, primal empathy or sympathy recognizes the suffering of others, while compassion adds a readiness and commitment to alleviate that suffering. This second, proactive response involves the activation of our prefrontal executive regions, the motivational readiness of the anterior cingulate cortex in the limbic system, while also activating the internal reward network that links the limbic striatum to the midbrain (Desbordes et al., 2012). So rather than an aversive experience, compassion becomes a profoundly rewarding experience of caring concern and engagement with others who are suffering (Leiberg et al., 2011). Taken together, this mature compassion has two critical parts that involve first experiencing others' suffering, then responding to it. When our response to our own or others' suffering has only the first phase of sensitivity or reactivity, but not the second phase of readiness and willingness to help, it eventually leads to the experience of empathic burnout or compassion fatigue (Ricard, 2016).

Another area of research that has contributed to the convergence of science and compassion is the new recognition of the social dimension in evolution and human development. Human compassion can go far beyond the symbiosis found in some of the simplest forms of life, even beyond the caregiving empathy, kin-directed altruism and reciprocal altruism we find commonly in the animal kingdom, since it is not limited to kin, tribe, or mutual benefit (de Waal, 2010). Human beings can feel part of vast social and cultural networks, and help complete strangers often with the same devotion we show our beloved family and friends. As the Dalai Lama proposes in *Ethics for the New Millennium*, we can even learn to embrace all humanity with an evenly applied universal concern. This capacity for

universal compassion and altruism is built into the human brain. This alone can explain why only a handful of classes in compassion training can elicit a proactive compassion that evokes the same neural system of motivation and reward which drives basic appetites in all our mammal and reptile ancestors (Weng et al., 2013). These recent studies support the Dalai Lama's claim that humans are able to develop wiser forms of compassion involving equanimity, and to discern them from the sentimental compassion of reactive empathy or naive sympathy.

The natural power of compassion is becoming clear not just in our new understanding of social evolution but also in recent studies of human development, both in childhood and throughout the lifespan. The powerful impact of a secure empathic attachment on the healthy development of the human mind, brain, and body has been explored by researchers in many fields. Daniel Siegel's chapter in this volume (Chapter 8), describes how secure attachment promotes higher brain development and integration, as compared with the lifelong challenges caused by insecure forms of attachment, and exacerbated by adverse events like abuse and trauma (Siegel, 2007, 2012). Paul Gilbert's work has also addressed the critical role of compassion in human development, and applied this new science in his groundbreaking approach to psychological healing, compassion focused therapy (Gilbert, 2014). Finally, the benefit of relationships motivated by love, compassion, and altruism has also been the focus of the growing field of positive psychology, which has firmly established the power of social emotions to foster the development of health, happiness, well-being, and creativity throughout the lifespan (Ryff, 2014).

Traditionally Informed, Evidence-Based Compassion Training

Perhaps the most promising aspect of this new consensus in science is the fact that it involves newly developed empirical paradigms of secular compassion training, based on centuries-old systems of Indo-Tibetan and Zen Buddhist contemplative practice. I have had the opportunity to participate in the new compassion training programs at centers and universities where compassion is being actively investigated. These include the G.R.A.C.E. training developed by Joan Halifax at Upaya Zen Center, the Compassion Cultivation Training (CCT) developed by Thupten Jinpa and his colleagues at Stanford, and the Cognitively-Based Compassion Training (CBCT) developed by Lobsang Negi and his colleagues at Emory. In addition, I have also studied with Paul Gilbert, a British psychologist who has worked to integrate Compassionate Mind Training (CMT) into his Compassion Focused Therapy (CFT). All of these new interventions consider empathy, compassion, and altruism as innate human capacities that are both healing and trainable. In what follows I will briefly discuss the nature of these interventions, some reflections on practice, and their application to psychotherapy and social psychology.

Three of the current interventions—CCT, CBCT, and CMT—follow a common logic and structure, informed by a time-tested system developed at Nalanda University in North India and refined over centuries in Tibet. They also share a basic approach and practice with the mindfulness-based methods of self-compassion discussed in the chapters by Christine Braehler, Chris Germer, and

Tara Brach (Chapters 9 and 10) in this volume. The common logic and structure these trainings share is traditionally divided into several phases that focus on building cumulative insights and skills. For the sake of this chapter, I will identify five phases, based on the Tibetan tradition developed by the Nalanda master Shantideva (685–763) and transmitted into Tibet by Nalanda abbot Dipamkara Atisha (982–1054). These five phases are: 1) mindful awareness; 2) unbiased empathic concern; 3) healing insight; 4) taking care and giving love; and 5) internalizing compassion and altruism. We can look at these one at a time.

First, compassion training presupposes a basic practice of and capacity for mindful self-awareness. Relying on calming practices like mindfulness of the breathing body or restorative yoga, this first phase involves overriding the mind and body's default mode of stress-related guarding and reactivity. When we feel more safely embodied, we are more open to mindfully turning our attention inward to recognize any unpleasant feelings, sensations, emotions, or memories. We are also prepared to turn our awareness outwards to the suffering of others, while balancing that with an internal self-awareness of any unconscious reactions we may have to their suffering. Once our own suffering or reactions to others' suffering can be recognized, mindful self-awareness can help us bear, accept, and manage our response to it without the unconscious stress-reactivity that may otherwise lead to social contagion or empathic burnout.

Second, compassion training requires that we practice honestly uncovering, accepting, and transforming the natural stress-reactive emotions that bias and block our capacity for mature empathy and impartial concern. This second phase involves acknowledging the biased emotions we naturally have towards people we identify as close, neutral, or far. Given the way our emotional minds and brains are wired for survival, our emotional connections are instinctively biased by clinging to loved ones, suspicion or prejudice towards strangers, and anger or envy towards rivals and critics. Fortunately we are equally capable of acknowledging and overriding these reactive emotional biases, and this practice trains us to gradually develop a more mature unbiased empathic concern or equanimous care for ourselves and all others. In effect, we become better, fairer people, more prepared to respond wisely and skillfully to suffering, wherever and however it occurs.

The third phase of compassion training takes the healing deeper and further, by bringing corrective insight and universal human understanding to any suffering we encounter, along with our unconscious response to it. This phase of training involves taking mindful awareness and unbiased empathy deeper into the roots of suffering: the imprints of distorted thinking and aversive emotions left from our instinctive stress reactions to experiences of trauma in adulthood or childhood. These imprints typically involve distorted, worst-case perceptions of ourselves as helpless, powerless, small, or bad, perceptions that anchor a chronic core sense of self-blame along with traumatic emotions of panic, rage, hurt, and shame. According to tradition, these cognitive distortions of self must be corrected if we are to fully heal and transform the repressed traumatic memories and emotions underlying our ingrained reactivity to our own and others' suffering.

The fourth phase of training involves the repeated exercise of cultivating positive social emotional states of love, care, joy, or peace, and applying them to soothe, relieve, and heal our own and others' suffering. Traditionally, this practice is framed as a conscious reversal of childish self-indulgence—seeking to get as much as possible and give as little as possible—into a mature engagement with life, by taking as much care of self and others as possible and giving self and others as much love as possible. This phase often involves envisioning self or others suffering and practicing feeling and extending love, care, joy, and peace towards that suffering, through envisioning self and others with kindness, even envisioning the flow of these emotions as rays of light or currents of nectar bringing security, relief, nurturance, and understanding.

The fifth phase of training is internalizing and integrating the love, compassion, and altruism we can cultivate in ourselves, along with the fully developed capacity for love and care we encounter in the kindness of caregivers, mentors, or role-models. This phase involves taking the love and compassion we cultivate or experience from others deep into our hearts and minds, to heal our suffering and gradually transform our sense of self and way of being in the world. Traditionally this is practiced by envisioning streams or rays of love and care from mentors into our hearts, or even taking the essence of the mentor into ourselves, until we begin to expand our childhood sense of self into a fully mature, enlarged, and compassionate self, experienced as our mentor's peer or as our ideal self.

The Practice of Compassion

Years of meditation has taught me that there are also differences between practitioners. An expert meditator can both feel and respond to more suffering than a novice meditator (Lutz et al., 2008; Desbordes et al., 2012). For this reason, when a person first begins to cultivate compassion, it is vital to begin by developing increased self-compassion. It all starts with mastering self-compassion. In later phases practitioners learn to experience wiser compassion for those we most love, then gradually extend empathy and care to those we typically have neutral feelings for, and finally move to the most challenging group of people: those with whom we are in conflict. Of course, in order to deepen and broaden our compassion, we must be able to transform the negative emotions that arise in all human relationships. How do we train in compassion without learning to work skillfully with all our emotions?

This challenge helps us understand why training in cultivating positive emotions and training in the management of difficult emotions are the two pillars of the development of unbiased empathy and wise compassion. Positive emotions alone have their limits. For compassion to be truly wise, stable, and effective, we need to combine positive emotions with critical intelligence and psychological insight. If we are serious about trying to relieve, reduce, or eliminate human suffering, we must develop what the Buddhist tradition calls empathic art or skillful means (*upaya*). Traditionally, the arts of compassion are cultivated by melding progressively stronger positive emotions together with progressively deeper levels of

insight or wisdom. In my view, this tradition approaches compassion as involving what Howard Gardner calls multiple intelligences (Gardner, 1999). According to the close predecessor of Shantideva, the great Nalanda master Chandrakirti (c. 590–670), compassion manifests in four successively wiser and deeper levels, four compassionate intelligences (Tsong Khapa, 1980). The first of these—sentimental compassion (*cintadrsti-karuna*)—is the most superficial form, in that it simply wishes to help suffering without the necessary insight to see the causal conditions of suffering or the skill to change those conditions. The second, narrative compassion (*sattvadrsti-karuna*), brings an evolutionary and developmental perspective to an individual's story of suffering that supports realistic empathy and the art to help that individual understand, accept, and transform suffering. The third, analytical compassion (*dharmadrsti-karuna*), refers to a deep, analytic empathy that discerns the precise mind/body states and causal factors responsible for a person's suffering, combined with the healing art it takes to help that person relieve or remove the root causes of suffering. Finally, the fourth and most profound is unconditional or de-objectifying compassion (*analambana-karuna*), which knows and responds to the other's suffering through a non-discursive empathic resonance like a mother's spontaneous attunement to her child. These multiple compassionate intelligences help flesh out how practicing effective compassion requires the capacity for seeing the reality of suffering and healing through profound insight or wisdom.

The main emotional obstacles to the practice of compassion are the reactive emotions of fear, anger, greed, envy, pride, and shame. Sadly, much of what we think of as the pursuit of happiness in our modern secular culture is driven by and reinforces these emotions. For instance, much of the striving behind our market economy is fueled by shame-based competition, fear-based consumption, and scarcity-based hoarding (Nussbaum & Sen, 1993; Layard, 2009). One thing is clear from the rapid rise of wealth inequality around the world, no amount of consumer goods or privileges can quench the thirst that comes of feeling alienated and alone. In fact, happiness research has clearly shown that our sense of well-being is only marginally affected by extrinsic factors like wealth or fame. Instead, it is predominantly a function of our intrinsic sense of human connection to others and of belonging to social groups—family, society, and community (Ryff, 2014). Compassion training can help break this futile cycle of stress-emotions, by helping people cultivate perceptions and experiences of being fundamentally connected rather than inherently separate from others. But this healing practice will only take root when the soil of the human heart and mind has been cleared to some extent of obstructing negative emotions by the practice of the basic art and science of mindful self-healing and self-analysis.

This is why the basic science and mindful art of self-healing taught by the Buddha and emphasized by Theravada Buddhism is fundamental to cultivating compassion. Of course, contrary to the popular culture of mindfulness, it is not enough to simply note suffering when it arises and wait for it to pass. The Buddha spoke of the causes of suffering, including our innate tendency to grasp onto things that invariably pass or change. As this instinct for grasping leads to

chronic frustration and discontent, we fall into negative moods and states of mind that isolate us from others and our real happiness. From this point of view, what we take to be the pursuit of happiness is actually a futile and addictive habit of self-medicating a self-imposed discontent. While the pains of aging, sickness, death, and loss are unavoidable, the suffering that comes of being caught in a death grip of grasping, along with the resulting panic, anger, and isolation, is in fact preventable. With an increased understanding of where our suffering comes from, and what can be done to prevent it, we would go a long way toward protecting ourselves from such avoidable suffering. Without this basic wisdom and mindful self-healing, we end up stuck in a rut of cultivating overconsumption, alienation, and magical thinking.

According to the Buddhist tradition, the disciplines of mindful self-healing and compassion training are mutually indispensable; both must go hand in hand. This compound medicine may be the Buddha's greatest contribution to humanity. And it is also an approach that has been rediscovered by most contemporary forms of psychotherapy. We must find ways to access our feelings—negative and positive—with unbiased empathic concern, and we also need to be able to recognize and work skillfully with the causes of these feelings so we can heal hurt and enhance well-being. Both of these key disciplines come together in the compassion trainings and self-compassion methods of today.

How Compassion Training Can Help Beyond Psychotherapy

However promising, our new science of compassion is still in its early stages; everything we have learned suggests that we will be investigating it for years to come. Thus far, our study of compassion reveals how beneficial it is to us as human beings, but also how a lack of compassion fuels not just personal problems, but all kinds of social conflicts, including domestic, gender, racial, religious, and ethnic violence. Compassion training offers one way of cultivating the basic human awareness that all beings matter, all beings wish to be happy and free from suffering. Compassion not only changes the brain, it also changes interpersonal style of individuals and the morphology of communities.

Given this understanding, and the effectiveness of compassion training, it is only natural that some researchers have called for integrating these methods into education, so that this key capacity can be developed universally and as early as possible. This potential clearly fits within progressive theories of education like Howard Gardner's theory of multiple intelligences (Gardner, 1999). Over the years, Gardner has added several new types of intelligence—such as introspective, interpersonal, and spiritual intelligence—which clearly touch on the role of compassion (Gardner, 2006). The same can be said for the concept of emotional intelligence developed by Gardner's student, Dan Goleman (Goleman, 2005). Is it possible to promote compassion using a secular, ethically informed curriculum? Although I believe it is, we will have to develop accepted models of such a curriculum and, of course, once we do, they will need to be tested in at least one generation.

Given the pressing need for more compassion-centered citizens in our global age, it is vital that we ask: how are empathetic, compassionate, altruistic personalities constructed? What distinguishes the person who stays within his comfort zone of self-interest from another who jumps the fence to help others? Even before schooling begins, developmental psychology has shed light on some of the key personal qualities and interpersonal dynamics that facilitate the ability to be attuned to the experience of others. Parents who express their recognition of their child's unique personhood, with its many specific preferences and capacities, will help the child grow curious about the personhood of the parent. This budding mutual recognition, or intersubjectivity, becomes the psychic ground of the child's growing capacity for other-centric living. Ideally, this capacity is generated in early life, but compassion training and psychological research have shown us that we can develop this needed ability at any age.

Masculine, Feminine, and the History of Compassion

For a variety of reasons, most cultures have come to believe that women are more compassionate than men. Often, however, as part of these beliefs, compassion is seen as a vulnerability that contributes to a stereotyped notion of feminine weakness. While such stereotypes tend to be based more on culture than biology, the fact that women have more left-to-right brain connectivity, while men have more back-to-front connectivity may suggest that women's brains are prewired for social emotional intelligence and men for task performance (Ingalhalikar et al., 2014). Even if we grant this may be so, our current knowledge of the brain's vast potential for plasticity and integration should insure that no human being should be constrained by rigid gender stereotypes. In a clear effort to challenge fixed gender beliefs, the Nalanda tradition inverted the prevailing Indian stereotypes, identifying compassion as masculine and wisdom as feminine. More important than gender from a traditional standpoint is integration, and this is conveyed by the teaching that human wisdom and compassion, objectivity and subjectivity, femininity and masculinity are relative, mutually indispensable aspects of our nature, and must be trained to work together in synergy in order for either aspect to be fully realized or effective.

Certainly the history of human evolution and the rise of civilization have influenced the changing values different cultures have placed on wise compassion versus physical strength and skill. Prehistoric human communities were tribal, and their biggest concern was basic survival. This may have led to privileging the masculine principle of physical strength, even in matters of healing and spirituality. With the agricultural revolution and the rise of civilization, social cooperation has become increasingly more crucial to human survival and thriving. India's cultural turn towards nonviolence and compassion anticipated long ago the shift that seems increasingly like a global imperative in our day. Buddhism in general and the Nalanda tradition specifically fostered that shift by promoting not just compassion but what they saw as an increasingly feminized culture of wise compassion. Thanks to Nalanda's role as the beacon of enlightenment throughout

Asia, this tradition has already made a real impact on world culture; and through the legacy preserved in the demilitarized society of Tibet, it promises to continue to help humanity adapt to the realities of global interdependence.

As we venture into the twenty-first century, we no longer need the brute strength of the prehistoric survival instinct to guide us. Now more than ever, we need the heart of compassion to fuel newer, more effective forms of leadership. In order to create a compassionate global society, we must find ways to insure that all global citizens receive training in unbiased empathy and altruistic leadership. Here I believe that women will and must participate much more actively, by encouraging and embodying the living values of compassion. Over time, it is my belief that women will be more visible and predominant among leaders worldwide, and that effective male leaders will be those who embody the androgynous principle of wise compassion (Nussbaum, 1999).

Conclusions: Science, Buddhism, and the Future of Compassion

I conclude with what may be the most delicate question: what role does Buddhism play in this shift towards more compassionate ways of healing, teaching, and leading? The Nalanda tradition is often divided into three main disciplines: science, psychology, and spirituality. What should most interest us about this tradition is its scientific and psychological legacy, including a meditative technology that can help us deal skillfully with our emotions, cultivate wise compassion, and grow a kinder humanity. As a practitioner, I approach Buddhism less as a religion than as a wiser, kinder way of seeing and living life, a way of being that holds out the promise of a more civilized and humanized world. At this pivotal time in history, humankind is sorely in need of more widespread empathy, compassion, and altruism, whether or not they are part of any religious belief system. Without this increase in human kindness, we are at risk of continuing on a path towards greater suffering and self-destruction, a path that seems distressingly evident around our globe.

However surprising it may seem, science and contemplation are becoming increasingly linked in our day. In this exciting era of revolutionary breakthroughs and bold advances, we have a great opportunity to link our scientific curiosity to a field of research and practice that promises greater safety, well-being, and community for all. Thanks to the surprising convergence of science and contemplative practice, we now have the methodology to train in competencies like empathy, compassion, and altruism that hold the key to lifelong health and happiness. The development of human civilization on this planet has involved our making literally countless mistakes and gradually correcting them. One day we will all leave this planet, and it is my hope that we can leave it a better place, having contributed to a new compassionate culture—secular and scientific—that will greatly benefit future generations.