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Bringing Compassion to Life in the  
Therapy Room: A Process-based  
Framework for Organizing and Delivering  
CFT

# Disclosures

- Russell Kolts
  - Relevant Financial Relationships:
    - Professor at Eastern Washington University
    - Employed in Private Practice
    - Receives Royalties from Guilford Press, New Harbinger, & Shambhala for books on topics related to the focus of this workshop.
    - Received a 50% registration discount for presenting this workshop.



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How do you  
know when  
you're doing  
CFT?

# CFT is Compassion-Focused

- Facilitating shift into care-giving social mentality.
- Working to soften and erode shame, and shift away from shameful self-attacking.
- Building capacity to connect with and engage in compassion-related strengths.



Compassion – being **moved** by suffering, and **motivated** to alleviate and prevent it.

- Two basic processes at work: **sensitivity** to suffering, and **motivation** to help.
- Compassion begins by **approaching suffering**...which requires **courage** as well as **kindness**.

# Targeting Processes vs Applying Techniques

- CFT **understandings**
  - 3 circles/systems, old/emotional-brain/new-brain, social shaping
- **techniques**
  - e.g. Soothing Rhythm Breathing, imagery, chair-work, and
- **practices**
  - e.g. compassionate-self, mindfulness, etc.

**are all in the service of developing and using compassionate motives and strengths and eroding shame, self-attacking, and avoidance.**

Goal is to help client strengthen and engage with basic care-giving motives, and develop compassion processes and related competencies. A few examples:

- Courage
- Sensitivity
- Wisdom
- Kindness/Caring Commitment
- Empathy
- Sympathy
- Safeness/Distress Tolerance
- Non-condemnation
- Ability to notice, accept, and engage with pain/suffering.
- Ability to understand and pain and struggle in social, biological, and historical contexts.
- Ability to soothe and feel safe.
- Ability to experience, acknowledge, reflect, and work with emotions in self and others.





"Hope Comforting Love in Bondage" courtesy of the Birmingham Museums and Art Gallery Collections, Birmingham, UK  
Artist: Sidney Harold Meteyard, 1901

So how do we bring compassion  
processes to life in the therapy  
room? **SMST**

**SUPPORT THEM**

**MODEL THEM**

**SHAPE THEM**

**TRAIN THEM**

- **SUPPORT THEM**

- Facilitating safeness through the relationship (secure base, safe haven)
- Facilitating compassionate realizations

- **MODEL THEM**

- Cultivating our own compassionate selves, and embodying compassion processes in the therapy room – self-practice.
- Helping clients explore difficult experiences with kind curiosity

- **SHAPE THEM**

- Elicit + Reinforce: Create opportunities for it to arise in clients.
- Pointing out and reinforcing successive approximations – with genuineness.

- **TRAIN THEM**

- Compassion Practices/Compassionate Mind Training

# Supporting the Arising of Compassion Processes



# Supporting

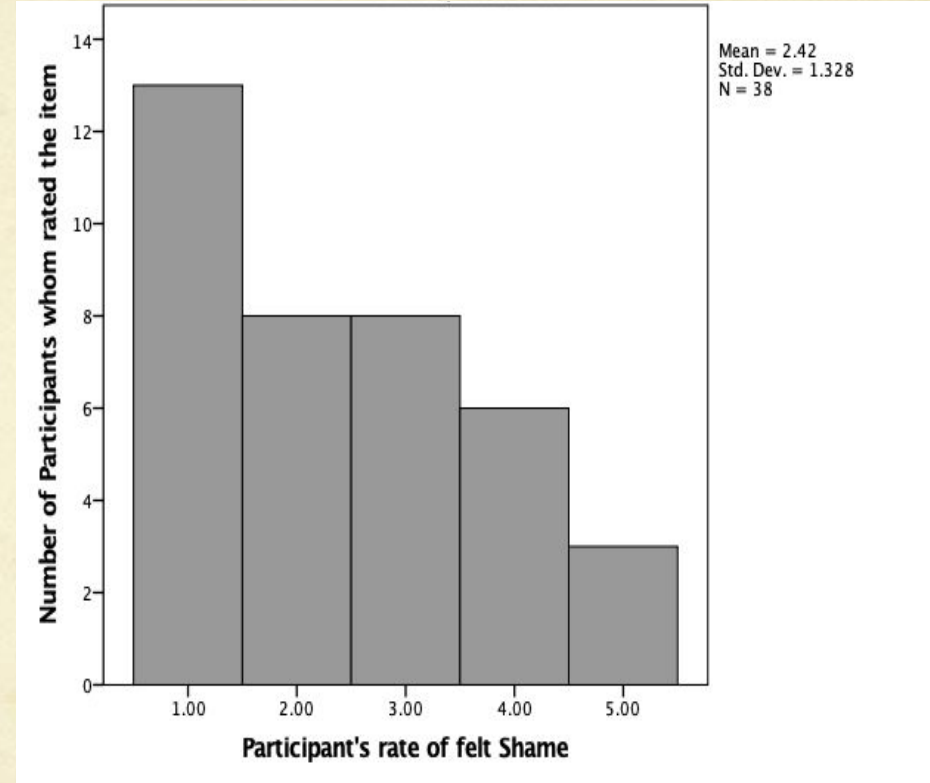
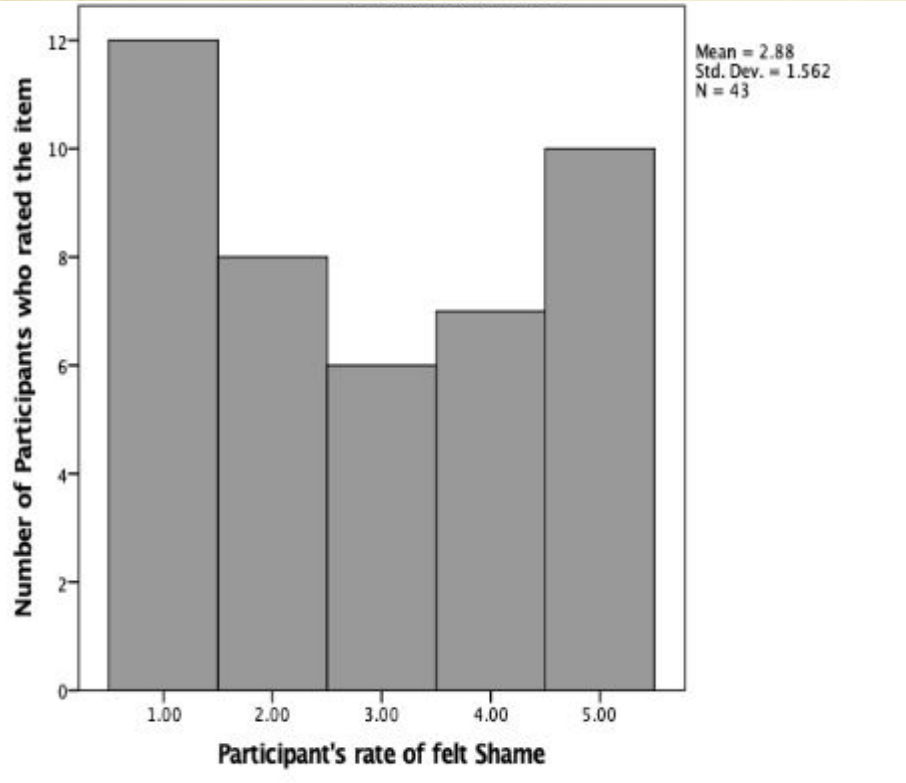
- Therapeutic Relationship – relational safeness
  - Attachment security facilitates creativity, compassion, altruistic behavior, and empathy (Mikulincer, Shaver, & Rom, 2011; Mikulincer & Shaver, 2005; Mikulincer et al., 2001).
  - Liking - ***“I’m on your side.”***
  - Many small/brief interactions that convey warmth/liking in palatable ways (fit with client’s attachment style). I think meetings and partings are particularly important.

# Supporting the Arising of Compassion Processes

Things to consider:

- Physical Environment – setting, furniture, positioning, lighting.
- Therapeutic Presence – how to “use what we’ve got” to help set the stage for our clients to connect to these processes.
- Meetings and Partings; happy to see you...
- Nonverbal behavior - matching and modeling –
  - “compassionate” facial expressions vary by content
  - How do we hold/position/use our bodies?

# Water Bottles and Teddy Bears



# Supporting

- “Not your fault” Realizations  
*soften the shame*
  - Evolutionary Functional Analysis (“How this makes sense in the context of how we evolved.”) – e.g. 3 circles
  - Neurological Functional Analysis (“Tricky ways our brains/minds can work...” ) – e.g. Old/emotional-brain/New-brain
  - Behavioral/Social Functional Analysis (“Given what I’ve experienced, does it makes sense that I would struggle with this?”)



# Modeling Compassion Processes

- Goal is for the basic rhythm of the therapeutic interaction to demonstrate the compassion processes we're helping our clients cultivate.
- We can consider and practice these processes from our own side, and purposefully cultivate our therapeutic style to demonstrate them.
- A good argument for self-practice/self-reflection work! (Kolts, Bell,

# Modeling Examples

## Safeness/Soothing

- “It’s good to see you. I’m going to have a cup of tea while we talk. Would you like one?”
- “I’m noticing that things have gotten pretty intense right now, and my threat system is definitely activated. How about we take a couple of minutes to slow down our breath and get our safeness systems online a bit, and then come back and explore this some more?”

# Modeling Examples

## **Mindfulness/Kind Curiosity**

- “How are you feeling right now as we talk about this?”
- (upon noticing a shift in facial expression or tone of voice) “What just happened there for you?”
- “As we talk about this, I’m noticing some \_\_\_\_\_ showing up in my body. What are you noticing in yours?”

# Modeling Examples

## Courage

- “What was the hardest part of that experience?”
- “How about we explore these feelings a bit? What do you notice in your body when the memories of that experience come up?”
- “One really important thing in therapy is that I not be in the position of thinking that we’re doing something that is helpful to you, when on your side, you know that it’s not. What might help you feel safe to let me know when things aren’t working well for you.” (modeling the courage – and *how* – to have tricky conversations).
- “What’s it like to share that with a man/white person, knowing that I can never fully understand what it’s like.” (modeling naming potentially tricky dynamics)



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# Shaping

- Shaping involves building behavioral repertoires through reinforcing successive approximations of the behaviors we want to see.
- Shameless plug: LEARN SOME FAP
- We can shape compassion processes!
- This often involves creating opportunities in the therapy session that *elicit* approximations of the compassion processes we want to shape in them, so that we can then identify and *reinforce* them.

# Effective Shaping

- Reinforcement needs to closely follow the demonstration of the behavior, needs to be clearly linked to the behavior, and needs to be *experienced* as reinforcing.
- Functional Analytic Psychotherapy (FAP) is based around these observations, and notes that many historic methods that therapists use to reinforce client behavior are *contrived* (“normal people don’t talk like that!”), and are less likely to be naturally reinforcing.
- FAP emphasizes that natural human interactions are inherently and powerfully reinforcing for humans.
  - e.g. Immediacy interventions – “When you said that, I felt...”  
“I felt really moved just now – it was clear that talking about this was so difficult, but you just kept going. What was that like for you?”

# Shaping Examples

## Soothing/Safeness

- “So you were feeling overwhelmed after work, and you took a walk that really helped you re-center. **What’s it like to notice your ability to work with your emotions like that?”**
- I like inviting clients to reinforce themselves – which we can reinforce when it works, and if it doesn’t, it teaches us about the dynamics of their self-criticism...giving us the opportunity to model mindfulness: “Did you notice that...”
- “It was really inspiring to hear how you took care of yourself like that. I think I need to take more walks in the woods!”



# Shaping Examples

- Courage
  - “Even though that was hard for you, you kept going. **What’s it like to notice that courage in yourself?”**
- Wisdom
  - “So it sounds like when you considered this situation in relation to your experiences growing up, you concluded that **of course** you would struggle with it. **What’s it like to make that realization?”**
  - “Wow – you did a really nice job of figuring out how all that works! What are you paying me for?” (said with good-natured humor).

# Shaping Client Self-Reliance

- One thing we want to shape in our clients is the internalization and application of their kind, wise, courageous, compassionate self, so we want to explore ways to do this – we want to put them in the driver's seat.
- For example, consider the difference between these two therapist comments:

“Given what you’ve gone through, **it makes sense to me** that you would struggle in this situation.”

VS

“Given what you’ve gone through, **does it make sense to you** that you would struggle in this situation?”

# Shaping Example – Teaching the Definition of Compassion

- Particularly for skeptical clients, going deep into definitions of compassion initially can invite defensiveness and more skepticism. *How do you feel when someone is trying to convince you of something?* 😊
- I've often found the following to work better:
  - Name the skepticism: “Some people hear the word compassion and think it is soft, weak, fluffy, or just being nice all the time...”
  - Briefly provide our working definition: “In CFT, we define compassion as involving sensitivity to suffering – noticing and being moved by it – combined with the desire to help. Compassion is really about what we do when things get hard, when suffering shows up – and that requires *courage*.”

# Example – Teaching the Definition of Compassion

- Then, we stop talking about it, and as therapy progresses, instead try to *create opportunities for it to arise* in clients.  
***Elicit and Reinforce.***
- For example, through helping them notice their experience (current or historical) and connect with caregiving motivation:
  - “What was it like for that 8-year-old version of you to be ridiculed like that? It seems like that would have felt terrible.”
  - “Let me ask you something – if there was something we could do to help that 8-year-old who just felt like he wanted to die, would you want to? Would you want us to help him?”
  - “What you just did there? Seeing how bad he was suffering and wanting to find a way to help. That’s compassion. That’s all it is.”



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# Eliciting Wisdom: Compassion in Two Questions

When we observe struggling/pain/shame:

- “Given what you know about yourself – your history, the things that have happened to you, the way your brain works - does it make sense that you would struggle with this?” (Hint: the answer is always YES)
  - “What’s it like to notice that?”
- “Given this, what would be helpful?”
  - Sometimes, what is helpful is action to change something.
  - Sometimes, what is helpful is acceptance and a commitment to help support ourselves as best we can as we face something that we can’t currently change.

# Courage in the Therapy Room

- What implications do the observations you made about your own experience have for your understanding of how/why your clients may struggle to confront the things that scare them, and how you might help them with this?
- What might this mean for how you prepare yourself for therapeutic work outside the session?
- Can you think of clients for whom greater ability to turn toward their pain/struggles might be helpful? How so?



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# So how do we bring compassion processes to life in the therapy room?

## ● **SUPPORT THEM**

- Facilitating safeness through the relationship (secure base, safe haven)
- Facilitating compassionate realizations

## ● **MODEL THEM**

- Cultivating our own compassionate selves, and embody compassion processes in the therapy room – self-practice.
- Helping clients explore difficult experiences with kind curiosity

## ● **SHAPE THEM**

- Create opportunities for it to arise in clients (and us!), and point it out!
- Pointing out and reinforcing successive approximations – with genuineness.

## ● **TRAIN THEM**

- Compassion Practices/Compassionate Mind Training

# Training Compassion Processes

- CFT Features many practices designed to help people purposefully cultivate compassionate strengths.
- The Compassionate Self practice, while being a practice in its own right, also provides an organizing framework for the cultivation of all of the other compassionate strengths.
- Rather than demonizing the versions of the self with which the client is less than comfortable, the compassionate self helps them develop a version of the self with the motivation and skills to take care of these other, more vulnerable versions.

# The *Compassionate Self* as an Organizing Framework for the Cultivation of Compassion

- An anchor-point for developing bodily and emotional experiences that support compassion: How would this compassionate self *feel*?
- A therapy orientation that involves *moving toward* compassionate strengths (rather than avoidantly moving away from what we don't want to feel/deal with)
- A perspective to shift into (compassionate social mentality): How would my compassionate self *understand* this?
- A motivation for compassionate behavior: What would my compassionate self know I need to *do*?

# Cultivating the Compassionate Self

- Goal is to make it as *real* as possible.
  - Body-work: stand, walk...
  - How would this compassionate version of you
    - Feel?
    - Be motivated to behave? Behave?
    - Consider things? Understand?
    - Sound?
    - Look?
- Imagine how to approach different situations as the compassionate self.

# Compassionate Self

- *Think of all the qualities that you would have as a compassionate person.*
- *Focus on your desire to become a compassionate person and think, act, and feel compassionately, spending time on each quality:*
  - *Imagine being calm and having wisdom.*
  - *Imagine being aware of what you and others feel.*
  - *Imagine being confident, having the ability to tolerate difficulties.*
  - *Imagine being warm and kind.*
  - *Imagine being non-condemning, but also wanting to help relieve suffering and produce change and happiness.*

# Compassionate Self

- *Try to create a compassionate facial expression, perhaps a kind half-smile.*
- *Imagine yourself growing stronger, as if you are becoming more powerful, mature, and wise.*
- *Pay attention to the sensations in your body as you develop this part of yourself. Spend a moment just feeling these sensations in your body.*
- *Think about your tone of voice and the kind of things you'd like to say or do.*
- *Think about your pleasure in being able to be kind.*

# Compassion Organizing the Mind

*Imagine yourself as this deeply compassionate being. Imagine that you notice that you or someone that you care about is suffering. Imagine that you are sensitive to their pain, and that you are motivated to help them.*

- *What do I pay attention to?*
- *What do I think about?*
- *What sorts of things am I imagining?*
- *What am I motivated to do?*
- *What sorts of things do I do?*
- *What emotions do I feel?*

# The Compassionate Self In Action

- *Bring to mind a situation that has challenged you recently.*
- *From this kind, wise, confident perspective, how would you understand this situation? Feel? Think? Work with it?*
- *How would you relate to the other people in this situation?*
- *If you could go back to a previous difficult (anger? anxiety) situation and whisper in your own ear, what would you say? What would you want that angry version of you to really understand?*



# Using the Compassionate Self to Enhance other Therapies/Strategies

- Compassionate Letter-Writing
- Behavioral Activation:
  - “What would the kind, wise, courageous compassionate self know you need to do right now?”
- Thought work
  - “What would your compassionate self think about this situation? How would s/he make sense of this?”
- Exposure
  - Bring the compassionate self into the imaginal situation – how would s/he understand, support, and encourage the vulnerable self?
- Chair work



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# Developing Ourselves as Therapists

- **Relationship**

- “How can I help provide my client an experience of relational safeness?”
- “How can I better model compassion (courage...)

- **Compassionate Realizations**

- “How can I help my clients connect with the “not my fault” realizations?” (hint: don’t lecture!)

- **Awareness**

- “How can I help increase my clients’ awareness of the arising of emotions, motives, self-criticism...?”
- “How can I help them relate to these experiences as they are, with kind curiosity rather than harsh judgments?”

- **Compassion Practices**

- “Which practice do I want to bring into my repertoire? What process do I want to target, and what practices would serve that?”

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