

# CENTER FOR INTEGRATIVE PSYCHOLOGY

## NEWSLETTER

### *The Compassion Issue*

FALL 2013

#### SPECIAL POINTS OF INTEREST:

- **A look ahead: CIP Events Calendar 2013-14**
- **A look back: Highlights from 2013**
- **Dissertation Bin: Compassion Research**

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## The Courage of Compassion

by Taryn Lilliston-Gammon, B.S., B.A.

Six years ago, motivated by a drive to understand the human experience (my own included) in a larger context, I began volunteering in developing countries. By living and working in small communities around the world, I became deeply aware of the power of compassion. Compassion bonded and enlivened people who faced challenges and suffering on a daily basis unlike any I had ever known. I was also touched by the compassion of my fellow volunteers, who found growth, strength, and meaning in connecting with one another, the local residents, and even themselves at times when they felt exposed, awkward, and uncomfortable. I felt this dynamic deeply and was profoundly changed by it, though I did not then understand it rationally or academically, and lacked words to explain it.

I began graduate school with the intent of studying this phenomenon, which I then described as researching the impact of sustained immersion in unfamiliar cultures on identity development and worldview. After months of reading the research and wrestling with this topic, I remained unsatisfied and felt I needed to change course. Around the same time, I was introduced to Dr. Kristin Neff's research on self-compassion and felt a new "click" of recognition. I left behind the ideas of cultural immersion and identity transformation and, while retaining my travel experiences as something wonderful in personal history, set them aside from my professional future.

I was also then listening to Dr.

Brene Brown's audiobook, "The Power of Vulnerability." Although I couldn't quite yet verbalize it, I intuitively knew that the constructs of vulnerability and self-compassion were connected. To my surprise and excitement, both Brown and Neff identified this connection, noting that the quality of openness that characterizes vulnerability is necessary for self-compassion.

In my clinical work and personal life, I began to explore this connection between compassion and vulnerability. In my practicum at the Sharp Pain Management Program, self-compassion permeates the treatment protocol for chronic pain. Some patients are indirectly introduced to self-compassion as a backdrop to biofeedback and physical therapy, while others in the "Therapeutic Self-Care" group receive more directed training about self-compassion in addition to traditional treatment. I also participate in a Compassion Cultivation Training (CCT) course that Sharp offers its employees, which experientially and didactically trains participants to elicit compassionate responses to themselves and others at times when compassion might feel difficult. As I connected these experiences with the existing literature on compassion, it became clear to me that vulnerability is at the core of both self-compassion and compassion for others.

I've also come to believe that the path to vulnerability and compassion requires courage. Compassion is courageous because it requires admitting and embracing

our vulnerability. It requires acknowledging that pain and suffering exist in our lives and in the lives of those around us, and moving towards that pain instead of away from it. At its core, compassion recognizes that we do not control ourselves, our lives, and the lives of others as we would like to believe. When we move with compassion towards suffering, we deeply wish we may alleviate that suffering yet simultaneously recognize that we may not be able to do so. Compassion involves being fully present when the space between reality and our wishing is vast, without catastrophizing, diminishing, avoiding or attempting to control our experience. In compassion, we see ourselves and others as we are, without pretense or illusion, providing warmth and kindness in the face of flaws, insecurities, injustices, and pain. When we have the courage to be vulnerable, we acknowledge our imperfect existence and in so doing can see our common humanity, the tie that binds us and makes compassion possible.

I see the courage of compassion in the chronic pain patients at Sharp who, after years of avoiding and pushing through their pain, begin cultivating awareness of that which has been their enemy. In so doing, they start to acknowledge their suffering and physical limits with kindness rather than criticism. I also see it in my fellow CCT classmates, who each week present themselves honestly to a mixed group of strangers and co-workers,

*“When we have the courage to be vulnerable, we acknowledge our imperfect existence and in so doing can see our common humanity, the tie that binds us and makes compassion possible.”*

expressing deeply personal challenges and realizations that have surfaced through practicing compassion.

It is only now, with my understanding of the interplay of vulnerability, courage and compassion, that I find the words to describe why my travel experiences were so transformative. In those unfamiliar cultures, we were stripped of our customary securities and practices – language, electricity, familiarity with geography and customs, daily showers, food variety, clean bathrooms, traffic laws, and much more. There were no protective barriers or pretenses, leaving no choice but to meet the selves that exist beneath our guards. To remain within this intense vulnerability, to not run away or fly home but instead take on the challenges with open minds and hearts, took immense courage. By embracing our vulnerability, we also opened ourselves to the pro-

found compassion that existed both around and within us. We witnessed the suffering and the joys of those around us and we shared in their tears and their laughter. We discovered the wealth of resources that exist within every one of us, even in the face of unspeakable poverty, and connected with ourselves, one another, and the residents of the communities on the basis of our shared humanity. We did what we could to help and then we had to go home. We carried the painful realization that we had not and could not alleviate all the suffering we had seen but were also enlivened by what we had accomplished and by the growth and connections the experience had engendered.

The topic of compassion is often cloaked in language of femininity and weakness, discussed as something “fluffy” and abstract, passive rather than active, “nice” but not powerful, a trait of

“bleeding hearts” but not getters. I would argue the opposite. Compassion is not always easy, natural, or even enjoyable. Compassion can be scary. Compassion takes fortitude, and an active commitment to seeing our strengths and weaknesses as they are. As such, compassion can be a powerful force for change in ourselves, our relationships, our jobs, and our communities because it allows us to see problems clearly, without avoidance or blame, and can help us move in a valued direction. Courage may not be a word typically associated with compassion, but I can think of nothing more courageous than turning toward the suffering we usually seek to avoid or control and greeting it with warmth. When we take this step, we discover that opening ourselves to the reality of a painful experience is also the path to healing, growth, joy, gratitude, and connection.

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## Using Values to Cultivate Courage and Compassion

In her blog “The Science of Willpower,” Kelly McGonigal, Ph.D. connects findings from two different research studies to show how one “self-affirmation” intervention can increase both compassion and courage (“Find Your Courage and Compassion with One Question,” 2012). The first study found that the intervention reduced *schadenfreude*, defined as “taking pleasure in another person’s suffering.” The second study used the intervention to cultivate courage. Participants were more willing to learn about potentially “threatening information” (i.e. health risks), a practice that McGonigal calls “the foundation for being able to try on new perspectives and learn from your mistakes.” According to additional research, this simple, 15-minute exercise also “reduces stress, boosts self-control, and increases perseverance in the face of challenges.” The intervention is re-printed below.

1. Make a list of your top 3 values. Values are principles, strengths, personal qualities, roles, or experiences that are most meaningful and important to you. Common examples include virtues (like honesty, patience, courage, or compassion), finding the beauty or humor in life, faith, connection to nature, service to community or family, health, lifelong learning, adventure, tradition, creativity, and so on.
2. When you need a self-affirmation boost, pick one of these values and write for five to fifteen minutes about why that value is important to you, and an example of how you live it. You could write about a past experience, a time in your life where you acted on your value, a challenge that you met with your value, or something you do every day to express this value. For example, if your value were generosity, you might write about a favorite memory when you were able to share something meaningful with a loved one, or a stranger; or about your favorite non-profit organization and why you donate your time and money to it.

<http://www.psychologytoday.com/blog/the-science-willpower/201201/find-your-courage-and-compassion-one-question>

## How to Self-Compassion

by Janina Scarlet, Ph.D.

I like to define self-compassion as the ability to breathe when a breath is most needed. Self-compassion is officially defined as the ability to provide care for and kindness to oneself when one is suffering. Self-compassion guru, Kristin Neff, defines self-compassion as no different from providing compassion (i.e., warmth, care, and the desire to help) toward another individual that is perceived to be suffering. She defines self-compassion as consisting of three components: mindfulness, common humanity, and self-kindness.

The first of these components, **mindfulness**, relates to the present moment experience and the willingness to observe the suffering of the self or another, in a non-judgmental manner, without over-identifying with the painful experience. Those readers who are familiar with acceptance and commitment therapy might recognize Neff's definition of mindfulness as that involving the concepts of acceptance, mindfulness, and cognitive defusion. This concept is necessary in order to recognize that one is suffering since without mindfulness, self-compassion is not possible. It is for that reason that patients with chronic pain disorder are taught mindfulness (pioneered by John Kabat Zinn in Mindfulness Based Stress Reduction, or MBSR, in the 1960s).

The concept of mindfulness is the first step of self-compassion because it relates to the ability to notice that one is in pain (whether it is physical or psychological pain). Research suggests that when one isn't mindful, that compassion is not likely to occur. For example, Darley and Batson ran a study with seminary students, who were asked to read the Good Samaritan passage, (i.e., a passage from the Bible, which deals with helping others in need) to the audience. Some participants were told that they have ample time to get to the talk, whereas others were instructed to hurry. On the way to the talk, the students encountered a homeless man, who appeared to be

injured but who, in reality, was a confederate of the researcher. Of those seminary students who were told to hurry, only 10% stopped to help the man, whereas of those who were not in a hurry, 63% stopped to help the man. These results can be interpreted to mean that when one is in a hurry (i.e., preoccupied or not mindful), he or she is less likely to be able to notice the suffering of another, and possibly, the suffering of the self.

**Common humanity** refers to the ability to identify one's painful experiences as a part of the human experience. Think about how often you might have been harsh on yourself as a result of making a mistake. Now

*“Self-compassion, in contrast to self-deprecation, allows for mistakes and provides motivation to continue despite setback.”*

recall how one of your friends might have tried to cheer you up by stating that he or she makes mistakes all the time. For some reason, this, above any reassurance, tends to be what makes us feel better about our predicament. It is for this reason that group therapy can be very effective for a variety of disorders: it allows group members to see that others suffer just as they do, and suddenly, the world feels a little bit less isolating. It is for this reason that I like to talk to my students about the “fraud syndrome.”

The “**fraud syndrome**” is what I like to call the fear that many graduate students and professionals exhibit. It entails the fear that he or she does not belong in the school or job that they have received. Thoughts of low self-worth, and oneself being a fraud, tend to be very common, along with the fear that others will find out about this “scam” and terrible consequences will occur. I myself remember experiencing the fraud syndrome

quite well, and still often find myself feeling as though I am one. Yes, I still feel that I am one, as I am writing this article, as I do not feel myself qualified to write it, and fear that the “fraud police” will find out. I was astonished to find out that other graduate students shared my fears of being a fraud, as did other colleagues, as does the New York Times best-selling fantasy author, Neil Gaiman! When I initially ask my students whether any of them have ever experienced the fraud syndrome, I often notice scared glances around the classroom as no one wishes to be found out. I then discuss the concept of common humanity and my own experiences about this topic. I then ask the question again, and this time, the majority of hands go up and smiles fill the room.

This concept of common humanity is necessary to understand and talk about, as it helps not only the patients, but also the mental health community, to feel less isolated, to understand that there are others who suffer in the same way, and for some reason, it becomes easier to breathe. In addition, common humanity is the core concept that allows me, as a mental health professional and as an educator, to relate to others. All of us have probably at some point worked with difficult patients. I work with patients with PTSD, many of whom can be hostile, distrustful, and angry toward the therapist when they begin treatment. What allows me to have patience, build empathy toward the patient, and build rapport, is the understanding that the person sitting in front of me is just like me. He (or she) suffered a terrible trauma, he is suffering right now, and he wishes to be free from suffering. “*Just like me.*” This understanding is the root of an



**Compassion Myth # 1:**  
*Self-criticism is a more effective motivator than self-compassion.*

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# Compassion: Frequently Asked Questions



David Peterzell, Brian and Jessica Evers Killebrew

“We need a balanced awareness of our internal world to sustain compassion toward others.”

## What is compassion and why is it important to psychology?

In *Wisdom and Compassion in Psychotherapy*, Chris Germer, Ph.D. and Ronald Siegel, Psy.D. (2012), define compassion as “the experience of suffering with the wish to alleviate it” (p.12). Compassion has been an integral component of Buddhist psychology and contemplative practices for hundreds of years but has only recently become a focus of research and clinical practice in modern psychology. Compassion, in conjunction with **wisdom**, “allow[s] us to tolerate, accept, and even grow from suffering,” encouraging us to be more in tune with our patients and thus aware of more treatment options. Additionally, “when we empathize with patients’ pain but ... exclude ourselves from our circle of compassion, we’re likely to develop **compassion fatigue**” (p. 3).

## What is the difference between compassion, empathy, and altruism?

Emma Seppala, Associate Director of the Center for Compassion and Altruism Research and Education, writes, “**Empathy**... is the visceral or emotional experience of another person’s feelings. It is, in a sense, an automatic mirroring of another’s emotion, like tearing up at a friend’s sadness. **Altruism** is an action that benefits someone else. It may or may not be accompanied by empathy or compassion, for example in the case of making a donation for tax purposes. Although these terms are related to compassion, they are not identical. Compassion often does, of course, involve an empathic response and an altruistic behavior. However, compassion is defined as the emotional response when perceiving suffering and involves an authentic desire to help.”

## How are compassion and self-compassion connected?

Chris Germer, Ph.D. and Ronald Siegel, Psy.D. (2012) write, “Many people find it easier to be compassionate toward a few special beings— pets, children, loved ones—than toward themselves, so current research does not show a clear, linear relationship between **self-compassion** and compassion for others (Neff, Yarnell, & Pommier, 2011). It makes sense, however, that in order to be compassionate toward all people, we need to be accepting of the many different parts of ourselves, including our less desirable qualities. Otherwise we will have a tendency to reject in others what we don’t like in ourselves. Compassion is an inside job. Compassion can turn to anger if we think that the suffering individual is undeserving of help; it can turn into distress if we don’t have the resources to help; into schadenfreude (pleasure at the suffering of another) if the sufferer is seen as an obstacle to one’s own happiness; and sometimes even into anger or shame when the suffering individual is oneself (Goetz et al., 2010). Therefore, we need balanced (mindful) awareness of our internal world, and an attitude of self-kindness, to sustain compassion toward others.” (p.15)

1. Germer, C.K. & Siegel, R.D. (Eds.). (2012). *Wisdom and compassion in psychotherapy: Deepening mindfulness in clinical practice*. New York, NY: The Guilford Press.

2. Seppala, E. (2012). The compassionate mind: Science shows why it’s healthy and how it spreads. *Observer* (26) 5. Retrieved from: [www.psychologicalscience.org/index.php/publications/observer/2013/may-june-13/the-compassionate-mind.html#.UYDX3kMzjKU.twitter](http://www.psychologicalscience.org/index.php/publications/observer/2013/may-june-13/the-compassionate-mind.html#.UYDX3kMzjKU.twitter)

## Free Meditation and Yoga Classes at the Health Center



No prior experience necessary! Classes are free for Alliant students. (\$5 for EF students.) Stop in any week!

**Yoga — Tuesdays and Thursdays from 3:30-4:45** in M-9. Wear comfortable clothes and bring a mat if you have it. Extra mats and blocks are also available.

**Meditation — Wednesdays, 2:45-3:45** in M-9. Classes will be lead by David Bowers, an Alliant graduate and experienced meditator and meditation teacher. Cushions and chairs are provided.

## The Creative Corner

Resuscitation  
~ Victoria Pak

Rounding the corner, the quiet chaos  
of strangers' blank and panicked faces  
shrouds the still one in disbelief.  
Their gazes fixed while death paws his feet,  
like a play-torn child tugging at sleep.

Damp earth greets my shaking knees  
as wisdom's toolbox reveals  
pristine instruments and expertise,  
awaiting our disparate lips' seal.  
I choose the sharpest tool, the bite  
of a live-giving kiss, delivering not  
the mark of true lovers' bliss,  
but flooding mucus from nose to cheek,  
like welcomed rain after countless dry  
weeks.

I rise to my feet on still quaking knees  
and stumble as I turn away,  
never to know the fate of the still one  
on that chilled and distant autumn day.

HAIKU CORNER  
~ Don Eulert

In the zen tradition, classic Japanese haiku participate in  
simplicity, wide sympathy, humility, and compassion.

A most striking example from Roko:  
*After last night's snowfall  
the sky is clear--  
how the corpse glistens!*

One from memory, author unknown, probably Issa:  
*No rice? in that hour  
into the bowl we put  
a maiden-flower*

That haiku's sentiment is echoed by Sodo:  
*My hut in Spring!  
True, there is nothing in it--  
There is everything!*

My own attempt to use a moment in nature as mirror:  
*Fall wind  
the bare orchard  
sighs*

## What Self-Compassion Is Not

*In order to clarify the concept of self-compassion, Kristin Neff, Ph.D. has used research and conceptual frameworks to distinguish self-compassion from the following concepts. The information presented here was obtained through her website, [self-compassion.org](http://self-compassion.org).*

**Self-esteem:** According to Kristin Neff, Ph.D., self-esteem is based on comparison to others and self-evaluation. The desire to increase self-esteem can lead us to compare traits such as attractiveness or intelligence; put others down to make ourselves feel better; and “ignore, distort, or hide personal shortcomings.” Importantly, self-esteem is “contingent on our latest success or failure” and thus is never stable. In contrast, self-compassion “allows for greater self-clarity, because personal failings can be acknowledged with kindness and do not need to be hidden” and “isn’t dependent on external circumstances, it’s always available.” Whereas self-esteem crumbles in the wake of a perceived failure, self-compassion remains a reliable source of comfort and motivation.

**Self-pity:** “When individuals feel self-pity, they become immersed in their own problems and forget that others have similar problems... Self-pity tends to emphasize egocentric feelings of separation from others and exaggerate the extent of personal suffering. Self-compassion, on the other hand, allows one to see the related experiences of self and other without these feelings of isolation and disconnection. Also, self-pitying individuals often become carried away with and wrapped up in their own emotional drama...In contrast, by taking the perspective of a compassionate other towards oneself, “mental space” is provided to recognize the broader human context of one’s experience and to put things in greater perspective.”

**Self-indulgence:** “Many people say they are reluctant to be self-compassionate because they’re afraid they would let themselves get away with anything. ‘I’m stressed out today so to be kind to myself I’ll just watch TV all day and eat a quart of icecream.’ This, however, is self-indulgence rather than self-compassion... Being compassionate to oneself means that you want to be happy and healthy in the long term. In many cases, just giving oneself pleasure may harm well-being (such as taking drugs, over-eating, being a couch potato), while giving yourself health and lasting happiness often involves a certain amount of displeasure (such as quitting smoking, dieting, exercising).”

**Compassion  
Myth # 2:**  
*Self-compassion  
means wallowing  
in one’s problems.*

## The Missing Piece: Mindful Self-Compassion (MSC)



**Michelle Becker, MFT**

*“Some of my patients were bothered by a compassionate response from me... Other patients soaked up the compassion from me like drops of rain in the desert.”*

Imagine my surprise when my patient said, “STOP THAT!” “Stop what?” I wondered. I was listening to my patient talk about something very painful and responded with a gentle *mmm*. At first it was hard to understand what was happening; yet, it happened more than once and with more than one patient. Some of my patients were actually bothered by a compassionate response from me. The heartbreaking part of this is that these were people who had been so deprived of compassion. They were in desperate need of compassion, yet they spoke to themselves in a very critical way and could not tolerate receiving compassion from others.

Other patients soaked up the compassion from me like drops of rain in the desert. They needed compassion desperately; much more than I could give in one session a week, or even two sessions a week. They left my office feeling better for having been compassionately met, but then white-knuckled the time between our sessions.

I was already teaching Mindfulness Based Stress Reduction (MBSR) and practicing mindfulness, loving-kindness and self compassion in my own life when I learned that Drs. Christopher

by **Michelle Becker, MFT**

Germer and Kristin Neff had developed an 8-week course in Mindful Self-compassion. I was delighted! From my own personal practice and from my professional experience, I was deeply aware this was the missing puzzle piece. “This is the salve the world needs” were the words that expressed my delight at finding this program. That was over a year and a half ago. Drs. Neff and Germer invited me to begin teaching Mindful Self-Compassion (MSC) and I’ve been teaching it almost continuously through the UCSD Center for Mindfulness ever since. To say it has been well received would be an understatement. Even participants with a 20-30 year meditation practice have remarked that it was the “missing piece” for them. MSC explicitly teaches us to pay kind and warm attention to what arises for us.

The patients I referred to above? Both groups have gone through the program with tremendous results. One patient came into a session saying, “It’s not my fault, I didn’t do anything wrong, I didn’t deserve it” in reference to her painful childhood. Her harsh critical voice was replaced with a kinder and gentler one. It was the turning point in treatment and she rapidly progressed toward termination. Imagine, she was no longer beating herself up for her misfortune and could actually receive compassion. Her mood became more stable, she was happier, more engaged with life, and her relationships with others improved markedly.

For other patients, the times between sessions became much easier, and as they learned to comfort and soothe themselves they were no longer so overwhelmed with life. They reported feeling less “needy” and more satisfied with life in general. For both groups, an increase in mindful awareness and a kinder, wiser, more balanced way of being has developed.

Indeed, this does seem to be the salve the world needs. Research has shown that self-compassion greatly enhances emotional well-being. It boosts happiness, reduces anxiety and depression, and can even help people stick to their diet and exercise routine. And it’s easier than you think. Most of us feel compassion when a close friend is struggling. What would it be like to receive the same caring attention whenever you needed it most? All that’s required is shift in the direction of our attention—recognizing that as a human being, you too, are a worthy recipient of compassion.

Research has also shown increases in self-compassion lead to increases in compassion toward others. Therapists are no exception. Research suggests that therapists who score high in self-compassion score high in compassion for their patients. If this sounds helpful to you, I recommend therapists take the class themselves first and then refer their patients to the class. Imagine taking care of yourself first. Now that sounds like self-compassion to me!

*“Self-compassion is a skill that can be learned by anyone, even those who didn’t receive enough affection in childhood or who find it embarrassing to be kind to themselves. Self-compassion is actually a courageous mental attitude that stands up to harm—the harm that we inflict on ourselves every day by overworking, overeating, overanalyzing, and overreacting. With mindful self-compassion, we’re better able to recognize when we’re under stress and face what’s happening in our lives (mindfulness) and to take a kinder and more sustainable approach to life’s challenges. Self-compassion gives emotional strength and resilience, allowing us to recover more quickly from bruised egos to admit our shortcomings, forgive ourselves, and respond to ourselves and others with care and respect. After all, making mistakes is part of being human. Self-compassion also provides the support and inspiration required to make necessary changes in our lives and reach our full potential.”* Christopher Germer, Ph.D

*Michelle Becker, MFT teaches Mindful Self Compassion at the UCSD Center for Integrative Medicine. To find out more about the MSC course, as well as other Mindfulness classes offered by the Center, please visit: [mindfulness.ucsd.edu](http://mindfulness.ucsd.edu).*



## A Randomized Controlled Trial of a Compassion Cultivation Training Program

### What is Compassion Cultivation Training (CCT)?

CCT was developed at the Stanford Center for Compassion and Altruism Research and Education (CCARE).

CCARE explains, CCT is “an 8-week course designed to develop the qualities of compassion, empathy, and kindness for oneself and others. The course, developed by a team of contemplative scholars, clinical psychologists, and researchers at Stanford University, combines traditional contemplative practices with contemporary psychology and scientific research on compassion.”

Learn more at: <http://ccare.stanford.edu/cct-details#sthash.DS60RkMX.dpuf>

The following is an abstract from a 2013 article of the same name by Hooria Jazaieri, Geshe Thupten Jinpa, Kelly McGonigal, Erika L. Rosenberg, Joel Finkelstein, Emiliana Simon-Thomas, et al. The article appeared in the *Journal of Happiness Studies* and can be accessed at: <http://spl.stanford.edu/pdfs/2012%20Jazaieri%20JOHS.pdf>

**Compassion Myth # 3:**  
You either have compassion or you don't.

Psychosocial interventions often aim to alleviate negative emotional states. However, there is growing interest in cultivating positive emotional states and qualities. One particular target is compassion, but it is not yet clear whether compassion can be trained. A community sample of 100 adults were randomly assigned to a 9-week compassion cultivation training (CCT) program (n = 60) or a waitlist control condition (n = 40). Before and after this 9-week period, participants completed self-report inventories that measured compassion for others, receiving compassion from others, and self-compassion. Compared to the waitlist control condition, CCT resulted in significant improvements in all three domains of compassion—compassion for others, receiving compassion from others, and self-compassion. The amount of formal meditation practiced during CCT was associated with increased compassion for others. Specific domains of compassion can be intentionally cultivated in a training program. These findings may have important implications for mental health and well-being.



Erving Polster, Ph.D., Life Focus Community event

## Functional Neural Plasticity and Associated Changes in Positive Affect After Compassion Training

The following is the abstract from an article of the same name by Olga M Klimecki, Susanne Leiberg, Claus Lamm and Tania Singer in the 2013 edition of *Cerebral Cortex*. Readers are encouraged to access the full article at: <http://www.ncbi.nlm.nih.gov/pubmed/22661409>

The development of social emotions such as compassion is crucial for successful social interactions as well as for the maintenance of mental and physical health, especially when confronted with distressing life events. Yet, the neural mechanisms supporting the training of these emotions are poorly understood. To study affective plasticity in healthy adults, we measured functional neural and subjective responses to witnessing the distress of others in a newly developed task (Socio-affective Video Task). Participants' initial empathic responses to the task were accompanied by negative affect and activations in the anterior insula and anterior medial cingulate cortex—a core neural network underlying empathy for pain. Whereas participants reacted with negative affect before training, compassion training increased positive affective experiences, even in response to witnessing others in distress. On the neural level, we observed that, compared with a memory control group, compassion training elicited activity in a neural network including the medial orbitofrontal cortex, putamen, pallidum, and ventral tegmental area—brain regions previously associated with positive affect and affiliation. Taken together, these findings suggest that the deliberate cultivation of compassion offers a new coping strategy that fosters positive affect even when confronted with the distress of others.

### Where can I take CCT in San Diego?

UCSD Center for Mindfulness: contact [mindfulness@ucsd.edu](mailto:mindfulness@ucsd.edu) to inquire about 2014 courses.

## Compassion Focused Therapy

The following is the abstract from an article by Paul Gilbert (2009) entitled "Introducing Compassion Focused Therapy." The article was published in *Advances in Psychiatric Treatment* and can be accessed at <http://apt.rcpsych.org/content/15/3/199.full>.

Shame and self-criticism are transdiagnostic problems. People who experience them may struggle to feel relieved, reassured or safe. Research suggests that a specialised affect regulation system (or systems) underpins feelings of reassurance, safeness and well-being. It is believed to have evolved with attachment systems and, in particular, the ability to register and respond with calming and a sense of well-being to being cared for. In compassion-focused therapy it is hypothesised that this affect regulation system is poorly accessible in people with high shame and self-criticism, in whom the 'threat' affect regulation system dominates orientation to their inner and outer worlds. Compassion-focused therapy is an integrated and multimodal approach that draws from evolutionary, social, developmental and Buddhist psychology, and neuroscience. One of its key concerns is to use compassionate mind training to help people develop and work with experiences of inner warmth, safeness and soothing, via compassion and self-compassion.



CIP Beach Party

## Is Compassion Natural or Learned?

The following is an excerpt from Emma Seppala's (2013) article "The Compassionate Mind" in the May/June edition of the *Association for Psychological Science's* magazine, *Observer*. Readers are encouraged to access the full article at: <http://www.psychologicalscience.org/index.php/publications/observer/2013/may-june-13/the-compassionate-mind.html>.

Though economists have long argued the contrary, a growing body of evidence suggests that, at our core, both animals and human beings have what Dacher Keltner at the University of California, Berkeley, coins a "compassionate instinct." In other words, compassion is a natural and automatic response that has ensured our survival....Michael Tomasello and other scientists at the Max Planck Institute, in Germany, have found that infants and chimpanzees spontaneously engage in helpful behavior and will even overcome obstacles to do so. They apparently do so from intrinsic motivation, without expectation of reward. A recent study they ran indicated that infants' pupil diameters (a measure of attention) decrease both when they help and when they see someone else helping, suggesting that they are not simply helping because helping feels rewarding. It appears to be the alleviation of suffering that brings reward — whether or not they engage in the helping behavior themselves... Research by Dale Miller at Stanford's Graduate School of Business suggests that this is also the case of adults, however, worrying that others will think they are acting out of self-interest can stop them from this impulse to help.

It is not surprising that compassion is a natural tendency since it is essential for human survival. As has been brought to light by Keltner, the term "survival of the fittest," often attributed to Charles Darwin, was actually coined by Herbert Spencer and Social Darwinists who wished to justify class and race superiority. A lesser known fact is that Darwin's work is best described with the phrase "survival of the kindest." Indeed in *The Descent of Man* and *Selection In Relation to Sex*, Darwin argued for "the greater strength of the social or maternal instincts than that of any other instinct or motive." In another passage, he comments that "communities, which included the greatest number of the most sympathetic members, would flourish best, and rear the greatest number of offspring." Compassion may indeed be a naturally evolved and adaptive trait. Without it, the survival and flourishing of our species would have been unlikely.

One more sign that suggests that compassion is an adaptively evolved trait is that it makes us more attractive to potential mates. A study examining the trait most highly valued in potential romantic partners suggests that both men and women agree that "kindness" is one of the most highly desirable traits.

### Compassion Myth # 4:

Compassion is not necessary for survival.

*"A little known fact is that Darwin's work is best described with the phrase "survival of the kindest"*

Marcy Witkin-Lupo and Avery



# Boundaries, Accountability, and Compassion

The following is an excerpt from “Gifts of Imperfection” by Brene Brown, Ph.D., LMSW. Dr. Brown is a research professor at the University of Houston known for her research on shame and vulnerability.

**Compassion Myth # 5:**  
Compassion means letting people off the hook.

One of the greatest (and least discussed) barriers to compassion practice is the fear of setting boundaries and holding people accountable. During the interviews [for my research], it blew my mind when I realized that many of the truly committed compassion practitioners were also the most boundary-conscious people in the study. Compassionate people are boundaried people. I was stunned.

Here’s what I learned: The heart of compassion is really acceptance. The better we are at accepting ourselves and others, the more compassionate we become. Well, it’s difficult to accept people when they are hurting us or taking advantage of us or walking all over us. This research has taught me that if we really want to practice compassion, we have to start by setting boundaries and holding people accountable for their behavior.

We live in a blame culture—we want to know whose fault it is and how they’re going to pay. In our personal, social, and political worlds, we do a lot of screaming and finger-pointing, but we rarely hold people accountable. How could we? We’re so exhausted from ranting and raving that we don’t have the energy to de-

velop meaningful consequences and enforce them.

Wouldn’t it be better if we could be kinder, but firmer? How would our lives be different if there were less anger and more accountability? What would our work and home lives look like if we blamed less but had more respect for boundaries?

*“It’s important that we can lean into the discomfort that comes with straddling compassion and boundaries”*

Setting boundaries and holding people accountable is a lot more work than shaming and blaming. But it’s also much more effective. Shaming and blaming without accountability is toxic to couples, families, organizations, and communities. First, when we shame and blame, it moves the focus from the original behavior in question to our own behavior. By the time [a] boss is finished shaming and humiliating his employees in front of their colleagues, the only behavior in question is his.

Additionally, if we don’t follow through with appropriate consequences, people learn to dismiss our requests—even if they sound like threats or ultimatums.

It’s hard for us to understand that

we can be compassionate and accepting while we hold people accountable for their behaviors. We can, and, in fact, it’s the best way to do it. We can confront someone about their behavior, or fire someone, or fail a student, or discipline a child without berating them or putting them down. The key is to separate people from their behaviors—to address what they’re doing, not who they are ... It’s also important that we can lean into the discomfort that comes with straddling compassion and boundaries... When we talk ourselves into disliking someone so we’re more comfortable holding them accountable, we’re priming ourselves for the shame and blame game.

When we fail to set boundaries and hold people accountable, we feel used and mistreated. This is why we sometimes attack who they are, which is far more hurtful than addressing a behavior or a choice. For our own sake, we need to understand that it’s dangerous to our relationships and our well-being to get mired in shame and blame, or to be full of self-righteous anger. It’s also impossible to practice compassion from a place of resentment. If we’re going to practice acceptance and compassion, we need boundaries and accountability. (pg. 16-19)

Stanley Krippner, Dream-work event



## Compassion Resources

In addition to the resources previously cited, the websites below provide numerous resources for further education about compassion, compassion-based meditations and therapies, and compassion research.

**The Compassionate Mind Foundation**, founded by Paul Gilbert, developer of Compassion Focused Therapy: <http://www.compassionatemind.co.uk/>

**Greater Good Science Center at Berkeley University**, research and resources on the psychology, neuroscience, and sociology of well-being: <http://greatergood.berkeley.edu>

**Awareness in Action: Integrating mindfulness, compassion, and meditation into the workplace:** [www.awarenessinaction.org](http://www.awarenessinaction.org)

**Stanford’s Center for Compassion and Altruism Research and Education**, current research and peer-reviewed articles: <http://compassion.stanford.edu>

**Mindful Self-Compassion**, free compassion meditations and handouts: <http://www.mindfulselfcompassion.org/>

## How to Self-Compassion, Continued from page 3

empathic listener and makes a great difference in determining whether one will respond to unkindness with fury or compassion and understanding that such unkindness is rooted from a great degree of suffering. This understanding can subsequently allow for a non-judgmental, compassionate response that the trauma survivor so desperately needs. Thus, the concept of common humanity is essential in the field of psychology and hopefully, will continue to be implemented in training and research.

The last component of self-compassion is **self-kindness**. Self-kindness refers to providing oneself with care when one is suffering not for the purpose of alleviating that suffering, but rather, because one is in pain. For example, when a dear friend is devastated by a loss of a parent, we might feel her pain (empathy) and wish to help her (compassion). We might then embrace our friend, knowing that this will not decrease her suffering as it will not bring her parent back; we do this still because our friend is in pain. When a child is teething, his mother might cradle him in her arms, not to take away his tooth pain, but because he is suffering, to soothe that suffering.

Self-compassion works the same way as compassion toward someone else. When one endures a painful experience, self-kindness, the third and final element of self-compassion, is essential in the ability to self-soothe. Examples of self-compassion include taking a break from work when one begins to feel pain or exhaustion, having a cup of hot tea to comfort oneself, meditating, hugging a pillow, or placing hands on one's chest as a form of self-embrace.

Sounds simple, if not silly, doesn't it? Yet how often do you, the reader, abuse the heck of yourself on a daily basis? How many times have you called yourself an idiot or a failure when you have made a mistake? How many profanities do you use when yelling at yourself for yet another trivial mistake that you have made? In fact, if most of us verbally treated our loved ones the way we cognitively treat ourselves, we would long have been abandoned on the grounds of emotional abuse. And yet we do it. Instead of a

shoulder angel and devil, we have the drill sergeant motivator and the abusive critic, who would put Roger Ebert and Simon Cowell to shame.

If self-deprecation is so destructive, then why do we do it? Some believe that it is because it allows us to be motivated in order to prevent negative consequences through the mechanism of negative reinforcement. The truth is that while one might have learned to work hard in order to avoid negative consequences (often from a critical parent or role model), research suggests that such stringent standards are actually counterproductive as they do not allow room for error. Consider an example of dieting. When a self-critical individual decides that she is going to begin a stringent diet regimen, there is no room for mistakes. If, however, she had a piece of cake while

***"The understanding of common humanity is the root of empathic listening and thus is essential in the field of psychology"***

on the "no carbs" diet, the bloodthirsty Ebert-Cowell spawn of the inner self-critic, swimming in the sea of self-hatred, will have a field day of self-torture, after which, the individual will decide to F\*\*\* this diet, as she's obviously not good enough to be on it and will never amount to anything. Ouch! On the other hand, self-compassion allows for mistakes, as this is a normal human experience (i.e., common humanity) and provides motivation to continue despite the setback.

Self-compassion is clearly a concept that everyone can benefit from, patients and therapists alike. It has been essential in my own personal and professional life. I had not known or understood self-compassion until a few years ago. Living with a chronic pain disorder, I never realized how much my own self-criticism affected my condition. In learning to practice self-compassion, I went from barely able to function due to my condition, to being able to live my life. It is the skill that I try to teach to my patients and my students, one that I believe is manda-

tory to prevent burnout, not only in mental health professionals but also in human beings in general.

It's interesting that self-compassion is often met with resistance and difficulty. Unsurprisingly, when people are lead through a Loving Kindness meditation, one which asks the participant to offer love and kindness to self and others, participants find it easier to send love and kindness to a loved one, and even to an enemy, than they do to themselves. Upon questioning people about this, I find that many do not find themselves worthy of self-compassion or somehow believe it to be selfish or self-centered.

*Then how can I learn to be more compassionate toward myself?* The answer is: take a breath. Everything begin with a breath. The breath is centering and grounding. Once you have found your breath and your feet, you have begun practicing mindfulness. Notice whether you are experiencing any suffering at this very moment. Suffering can include physical or emotional pain, anxiety, thoughts of inadequacy, shame; I'm sure you have a long list.

The next step is common humanity. It entails recognizing that you are not alone in this suffering. Others probably experience the same kind of suffering as you do at this very moment. Thus, you are not a failure, an idiot, or any of those things you call yourself. You're human with flaws and excellent qualities as well, just like everybody else.

The final step is self-kindness. You can practice that in several ways, all of which are described by Kristin Neff in her publications. I usually like to start by placing the palms of my hands on my chest and take a few breaths. Try it. Another exercise you can try is, rather than speaking to yourself from the inner critic voice, speaking from a self-compassionate one. It might help to imagine what you would like to say to a dear friend if he or she was going through what you are. Over time, your inner self-compassionate voice will grow and develop, and hopefully, you will be able to recognize that everyone suffers and everyone makes mistakes. *Just like me.*

*Dr. Janina Scarlet is a research faculty at Alliant International University in the Clinical Psychology PhD Department. She has a background in behavioral neuroscience. Her research interests include compassion and mindfulness-based interventions for various disorders, such as anxiety, trauma, and chronic pain.*

## Spring and Summer 2013: Events Highlights



Richard Schere, Ph.D. at Open Mic Night

- **The Life Focus Community**, April 2013 ~ Dr. Erving Polster introduced attendees to the design of Life Focus Community meetings and lead an interactive discussion about the ways in which the exercise of life focus extends beyond familiar psychotherapeutic goals of growth and cure.
- **Open Mic Night**, June 2013 ~ The annual CIP Open Mic Night once again provided a vibrant atmosphere for connection, community, and personal creative expression ranging in form from music to poetry.

## May Event Recap: A Weekend Working with Dreams

In Psychology, we don't often work with dreams. Typically, we focus on events while people are awake, and work with them to improve their waking lives, without delving into the land of their dreams. In May of 2013, CIP attendees were given the amazing opportunity of experiencing one of the masters in dreamwork. On the evening of May 3rd, Dr. Stanley Krippner shared his knowledge of the importance dreamwork, detailing several different shamanistic traditions and their use of the phenomena of dreams in order to promote spiritual healing and growth.

Early the next morning, Dr. Krippner continued to guide our journey with an interactive workshop where we were transformed into dreamwork clients and therapists under his watchful eye. Several of us offered our dreams as examples for Dr. Krippner to work with. After selecting a dream, he demonstrated a one-on-one session, a group therapy session, and a psychodrama session with willing volunteers, before setting us off to work with each other. The methods presented were friendly to all theoretical orientations, so no matter our experience or preferences, we were all on a level playing field, had the opportunity to bring something to the practice, and left with a greater understanding of dreamwork. For those of us who were lucky enough to have our dreams chosen, we were given the chance of a lifetime to work with Dr. Krippner. Personally, after his kind and careful attention to a particular dream that had been haunting me, I have not had another recurrence of that nightmare! ~ by Ivy Kesinger

For DVDs of the past CIP events listed below, please visit:

[www.centerforintegrativepsychology.org](http://www.centerforintegrativepsychology.org)

- Forgiveness
- Psychology of Sustainability
- Care for the Caregiver
- Nature and Healing
- War and Recovery
- Exploring the Science of Mind & Body
- Integral Couples Counseling
- Mindfulness and Intimate Relationships

## September Event Recap: Sexuality, Kink, and Life

Sexuality is, unfortunately, something people often feel should be discussed behind closed doors. On the evening of September 6th, those doors were burst open by the willingness of four panelists to speak openly and honestly about their lives as LGBTQ individuals and professionals. Dr. Yaron Pruginin, who comes from a family with Jewish traditions, shared his life with us as an openly gay man, adopting children in a committed relationship with a closeted husband. Tiffany Jesperson, MSW, described how life as a woman from a Mormon tradition suddenly changed when she came out as a lesbian. Connor Madocks guided us through the journey of his transition from motherhood as a female-bodied male into a man whose body finally matches his gender identity. Finally, Dr. John McConnell opened our eyes to the world of kink sexuality, not only in the LGBTQ community, but in the community at large.

In a room absolutely packed with professionals and students, these four brave individuals opened minds (and hearts) to their struggles in a heteronormative world. This was undeniably one of the most attended Integrative events for a good reason – our world is beginning to change. LGBTQ individuals are no longer pathologized in the DSM, congress finally made the decision that marriage cannot be defined as “between a man and a woman”, and more people feel safe coming out to their friends and families. We still have a long way to go, both in psychology and in the world, but this evening was an enlightening step along the path to true equality. ~ by Ivy Kesinger

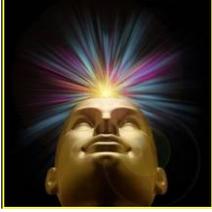


Speakers at the September LGBTQ Event

## CIP Events Preview: 2013 - 2014

□ November 1st, 6-8:30: **Book Release Celebration: *Ritual and Healing*** (2.5 CEs)

□ December 7th, 7:00p: ***CIP Multicultural Holiday Celebration***



□ February 7th, 6-8:30p: **Theories of Consciousness** with Walt Rutherford, Ph.D. (2.5 CEs)

□ Date TBD: **Digitalization of the Psyche** (2.5 CEs)

□ Date TBD: **Liberation Psychology** with Todd Sloan (2.5 CEs)

□ Date TBD: **Highly Sensitive People** (2.5 CEs)

□ May: ***Integrative Psychology Research***

□ June: ***Open Mic Night***

Listed events are subject to change. Please visit [www.centerforintegrativepsychology.org](http://www.centerforintegrativepsychology.org) for dates and information about these and other CIP events

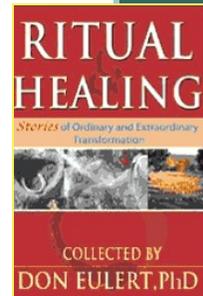
Join Us!

### Ritual and Healing: Book Release Celebration

Seven years in the making, *Ritual & Healing: Stories of Ordinary and Extraordinary Transformation*, has been released!

Please join us on November 1st to celebrate the contributing authors and all who made this collection possible. Editor Don Eulert will discuss the journey behind the making of this exciting collection. Authors will describe and read from their chapters, with time for interactive discussion about the role of ritual in contemporary life, for socializing and book signing.

Please RSVP at [www.centerforintegrativepsychology.org](http://www.centerforintegrativepsychology.org). 2 Continuing Education units available.



### CIP Multicultural Holiday Celebration

Join CIP for a night of holiday magic as we welcome in the season with a celebration of acceptance and sharing. The festivities will take place on December 7th at 7pm and will graciously be hosted by Marcy Witkin-Lupo. Please bring a dish to share! Contact Victoria Pak at [integrativepsychology@alliant.edu](mailto:integrativepsychology@alliant.edu) or [info@centerforintegrativepsychology.org](mailto:info@centerforintegrativepsychology.org) for details and directions.

### Compassion Dissertation Bin

The following compassion-related research has been completed or is being developed by students at Alliant International University, San Diego.

#### Completed Dissertations:

- Elizabeth Kingsbury (2009), *The relationship between empathy and mindfulness: Understanding the role of self-compassion.*
- Kevin M. Fawcett (2009), *Compassion fatigue and psychotherapy: An analogue assessment of the silencing response.*

#### In Development:

- Jessica Moore, *The role of self-compassion in the facilitation of posttraumatic growth in chronically homeless individuals.*
- Taryn Lilliston Gammon, *The utility of a self-compassion intervention in the treatment of chronic pain*
- Nathaniel Altemeyer, *The effectiveness of compassion training in reducing burnout among healthcare providers*
- Arezoo Masjedi Esfahani, *Examining the efficacy of a compassion focused therapy in the treatment of individuals with obsessive compulsive disorder*



Tom Habib, Victoria Pak, and Thad Camlin



# THE CENTER FOR INTEGRATIVE PSYCHOLOGY MISSION STATEMENT

***The Center for Integrative Psychology aims to promote theory, research and practice in the field of Integrative Psychology locally and globally.***

### **Integrative Inclusions**

Integrative Psychology *includes* the cognitive and scientific and *transcends* to include the ethical, aesthetic, and relational domains that make our lives meaningful. An integrative approach bridges the research and practice of mainstream psychology with interdependent systems, to avoid marginalizing the many voices and worldviews necessary for a full-spectrum psychology.

Thus an integrative approach addresses the well-being of the individual and of society by including the global, ecological, spiritual, and socio-cultural contexts of health. Integrative psychologists, challenged to offer pathways to well-being in our times, mediate an “*all-quadrant*” mindfulness. Some marginalized domains include moral development, postmodern meaning-making, ecopsychology, complementary health practices, spirituality and psychology, Eastern practices, social justice, cultural anthropology, archetypal psychology, creative and expressive arts therapies, evolutionary psychology, mind/body intentionality, transpersonal psychologies, gender issues, and political psychology.

### **The Center for Integrative Psychology**

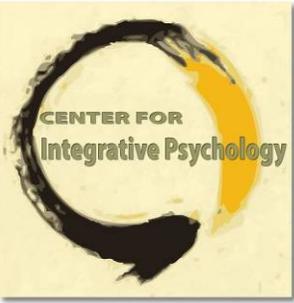
The Center for Integrative Psychology is a community and web based think-tank for assessing current needs and supporting a future-directed psychology. The Center collaborates with the California School of Professional Psychology’s Psy.D. program, which provides doctoral candidates the opportunity to pursue Integrative interests within an American Psychological Association (APA) accredited graduate training program that provides the degree requirements and practicum/internship experience towards licensure. A clinical psychology degree with an Integrative Psychology emphasis will enable the professionals -in-training to coordinate graduate studies through courses in both traditional and integrative areas, to acquire inclusive clinical experience, and to implement integrative methods for research.

A collaboration between CSPP/Alliant International University and the Center intends the best of both worlds. A traditional, rigorous APA accredited clinical study and training, supplemented with an integrative curriculum, designed and taught by members of the Center, enables graduates to function in both traditional and integrative oriented settings. Candidates (themselves part of collaborative CIP planning) meet with each other and with experienced professionals in real-world dialogue and visioning at the Center’s community events.

In the larger field, resources and information exchange about the potential of an integrative approach across domains are linked at the *integrativepsychology.net* website. The Center aims to participate in, and contribute to, interdisciplinary paradigm shifts now occurring in medicine, community and social health services, worldview perceptions, and global mind change.

# Areas of Psychology Organized into Wilber's 4 Quadrant Integral Model





# Center For Integrative Psychology



**CSPP** CALIFORNIA SCHOOL OF  
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The Center for Integrative Psychology aims to promote theory, research, practice, and collaboration in the field of Integrative Psychology.

### CIP Statement of Purpose

Integrative Psychology emphasizes the interdependence of social, cultural, physical, spiritual, and psychological dynamics. Studying well-being from a systems perspective combines traditional healing wisdoms and new paradigms of social evolution. The Center's programs honor diversity by integrating ecological, philosophical, spiritual, aesthetic, cultural, and scientific ways of knowing. It emphasizes psychology's agency in social contexts.

### The Center's Public Face

The aim of CIP's collaborative programs is not only to support the training of doctoral integrative candidates as future clinicians and researchers. We also seek to sponsor public educational forums, to offer research for outcomes of integrative practices, to provide a center of community networking for agents of change, and to website information enabling 21st generation researchers and practitioners to stay current with interdisciplinary and global paradigm shifts occurring in psychology, social and health sciences, and across both humanistic and physical sciences.

*Alliant is a private, non-profit University accredited by the WASC. We are an equal opportunity employer and educator.*

### Newsletter Editor:

Taryn Lilliston-Gammon, B.S./B.A.

### Photo Credits:

Ute Jamrozy, Ph.D.

### Check out what's on our website:

[www.centerforintegrativepsychology.org](http://www.centerforintegrativepsychology.org)

- ◆ *Employment Opportunities*
- ◆ *Community Resources*
- ◆ *Conferences, Workshops, and Events*
- ◆ *CSPP Integrative Courses*
- ◆ *CIP Events Calendar*
- ◆ *Research Archive with Dissertation Abstracts*

### **Do you want to contribute to the Newsletter?**

Send ideas and feedback to: Taryn Lilliston-Gammon at [taryn.lilliston@gmail.com](mailto:taryn.lilliston@gmail.com)



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