Kindness behaviour training (KBT) was developed as a response to help people sustain and develop their mindfulness practice. This paper describes how KBT came to be developed, the main characteristics and some preliminary findings.

There are three main steps to mindfulness-based approaches. Firstly developing awareness, secondly learning to accept and be with difficult experiences, and thirdly making wise choices on the basis of the increased awareness. The second step is the one that often people struggle with. The idea of accepting difficult experience is counter-intuitive and usually we have a tendency to ignore or push away such experience. However, this step is crucially important to an effective mindfulness practice. If we are experiencing something difficult that is not too strong, it may be relatively easy to learn to stay with it and accept it. Acceptance becomes much harder if we are struggling with more intensely painful states of mind or bodily sensations.

The practice of mindfulness has its roots in Buddhism. As well as mindfulness, Buddhism emphasises kindness. My aim was to develop a course that would help people cultivate kindness as a complement to the mindfulness-based approaches, which could enrich the practice of mindfulness and help to foster acceptance.

In developing KBT as well as drawing on traditional Buddhist teachings, I used elements from compassion-focused therapy (CFT) and positive psychology. CFT has been developed by Paul Gilbert and his work has been influenced by evolutionary psychology (Gilbert, 2013). Broadly speaking, according to evolutionary psychology there are 3 main emotion-regulation systems. The first is the threat system, which involves detecting threats and selecting a response to them, such as fight or flight. The second is the drive-excitement system, which gives a burst of pleasurable feelings, and motivates us to seek out pleasure and achievements. The third is the care and contentment system. Its function is to soothe, seek proximity and safety. Kindness is associated with this system. Often the three systems get out of balance, and in many patients with mental health problems the threat system predominates. The care and contentment system can help to re-balance the three systems. In the KBT course I explain the three systems, to give a perspective on participants’ emotional functioning, but also to emphasise that even if the care and contentment system is under-developed, we still have it. We all have the kit for kindness and can develop if further.

Martin Seligman’s positive psychology looks at what promotes happiness (Seligman, 2002). Acquiring things and sense pleasures tend not to be associated with enduring happiness, although savouring can help to maximize pleasurable experience. Learning to pay increased attention through mindfulness can strengthen the ability to savour, and this is brought out in
the KBT course. Acting on one’s strengths and virtues are stronger promoters of happiness. For many people kindness may be a virtue that is concordant with their values, and hence to act with kindness may be a means to promote happiness.

KBT consists of learning kindness meditation and putting kindness into practice in daily life – the behaviour aspect of kindness behaviour training. The kindness meditation is an intensive way to learn to strengthen the care and contentment system. Learning to do this requires repeated practice and hence KBT is a form of training. The eight week course starts with two weeks of mindfulness, which is a refresher for those who done a mindfulness-based course before, or as a basic introduction for those new to meditation. This is followed by six weeks focussing on kindness. There is also a one day retreat to practise kindness meditation more intensively.

In KBT, kindness is described as including sympathy, understanding and action. The sympathy is a feeling for the suffering or other experience encountered. The understanding implies an element of wisdom in terms of knowing what is happening and how best to respond. The action refers to a motivation to respond with kindness, where this is possible. Kindness in KBT is directed both towards oneself and others. This ‘true’ kindness is distinguished from ‘false’ kindness. Stefan Einhorn (2006) describes three forms of ‘false’ kindness: weak, stupid and manipulative. Weak kindness is believing that to be kind means being a doormat to others’ demands. Stupid kindness is where there is a lack of understanding or appropriateness – for example insisting on helping someone who doesn’t want to be helped. Manipulative kindness is where the apparent kindness is primarily based on some ulterior motive; to get something for oneself rather than really being helpful. There are also near enemies of kindness such as sentimentality and pity. In the course, the near enemies and false forms of kindness are described and discussed to help to clarify what we are trying to cultivate. If one understands kindness to mean being weak, for example, one is unlikely to want to devote any effort into cultivating it.

The six weeks on kindness introduce a different approach to kindness meditation each week. These are using the breath, using words and phrases, through appreciation and gratitude, involving the imagination, reflecting on one’s common humanity and another imaginative approach called kindness in the universe. To put kindness into action, participants are invited to practise generosity and contentment. There is also a discussion on kindly speech, with an encouragement to try this out. The kindness breathing space is adapted from the three minute breathing space used in mindfulness-based approaches and acts as a bridge between the formal meditation and putting kindness into action in daily life. Each week there is home practice including a meditation and usually some other activity.

To date 145 people have attended a KBT course. Most people gave a history of depression, with about 10% having a history of addiction. Jed Shamel recently completed his clinical doctorate exploring what happened to people on one of the KBT courses. This primarily qualitative study suggested that people doing the course experienced increased self-
acceptance, reduced self-criticism and improved emotional regulation. In relation to others, they appeared to have increased empathy, increased interest in others and less rigid expectations of others. The following quotes from participants give some flavour of how they experienced the KBT course and illustrate some of the key learning points. Just clarifying what kindness is and is not seemed to be an important aspect of the course:

*Kindness is not about being nice. That I found so helpful… that kindness doesn’t mean sort of always being nice and sweet and meeting everyone’s needs. Kindness also means being honest and saying what is, not just feeding someone’s desires or sorrows but also saying look, I think this is happening or not just saying to someone oh yeah you’re right and that’s really bad. Kindness also means supporting someone with constructive feedback… but you know being supportive in an honest and constructive way.*

Many people have a critical inner voice. Gaining some freedom from this can have a marked impact on someone’s quality of life:

*I mean when you are not beating yourself up about something, you can enjoy things for what they are…. It’s just allowed me to enjoy things…. I’m only aware now, looking back at it. At the time I just thought you know this is what people do.*

The meditation on common humanity emphasises that everyone wishes to be happy and does not wish to suffer, yet we all experience suffering. This reflection can bring a broader perspective and boost motivation to be kinder:

*I suppose the realisation that if you’re kinder to others and more supportive of others, just feeling a bit more towards others, not so judgemental and a bit more empathetic, then actually things are a lot easier. Just the realisation that everyone has something going on in their lives.*

Some participants find that they are able to take a greater interest in others. Even though they may still have their critical, negative thoughts, it can be possible too to take more interest in other people:

*Taking a genuine interest, which I always thought I did… I structure our conversations differently; I ask her (family member) questions that are more pertinent to her experience of things, rather than questions that I think are important to her, and actually listening to stuff that’s important to her, rather than brushing over it.*

Another change of perspective that was described was having a more balanced view of people, including other people who are experienced as difficult:

*I’m feeling much more open, spacious towards people, especially more difficult people… much more accepting, expecting less. Just focussing on what I don’t like about*
them or what’s difficult, the person sort of shrinks to just that, but I think the course helped me, really to remind myself of... in each person there’s so much more.

Overall the preliminary data is suggestive that KBT can complement mindfulness-based approaches and contribute to individuals’ well-being. The course was developed primarily to help people with histories of depression, anxiety and addiction. However, there is also an interest in using KBT to promote resilience and kindness among health professionals.

References:


Gilbert, P. (2013) *The Compassionate Mind (Compassion Focussed Therapy)*. London: Constable and Robinson


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