CULTIVATING COMPASSION
DEVELOPING A HABIT OF
MERCY AND RECOGNIZING ITS
INTERRUPTIONS

-Dr. Janet K. Ruffing, RSM
Catherine McAuley, founder of the Sisters of Mercy, confidently wrote about the reciprocal relationship in the lives of her sisters between contemplation and action, between our centeredness in God and the spiritual and corporal works of mercy as constituting “the very business of our lives” (Neuman, 390). She was convinced that God empowers the particular grace of developing a habit of mercy so that we learn to embody God’s compassion in our world and that we become holy in this process. Centered in God, whose face we concretely encounter in Jesus (Misericordia Vultus) we quickly learn that God makes our works of mercy fruitful not only for those we serve, those with whom we stand in solidarity, and those from whom we learn mercy, but for ourselves as well. I believe this dynamic simply describes how we learn to be Christians. God, who is “rich in mercy,” draws us ever closer to God’s own heart, making our hearts one with God’s. Plunged into the world’s suffering, we rely on God’s abundant and continual flow of mercy to us and through us which then pours itself out upon those who suffer.

MERCY NEVER STANDS ALONE

Contemporary Biblical scholarship has richly described how central compassion is in the ministry of Jesus who exemplified it in the many scenes in which he is portrayed as being moved with compassion in response to the suffering of one woman seeking His help and whom He both heals and humanizes. Compassion is more than a feeling, although it includes feelings and emotions or the affective side of ourselves. It also involves an effective response, a remedy or amelioration of concrete suffering.
Mercy is included among the beatitudes: “Blessed are the merciful, for they will receive mercy” (Matt. 5:7). Mercy is even more concretely described in the parable of the Good Samaritan (Lk. 10:25-37) which exemplifies the merciful response to the robbery victim left in a ditch by the side of the road. Two men pass by without stopping, both of whom ought to have responded with compassion. But it is the outcast (from a Jewish perspective) the despised other, who immediately and personally tends the man’s wounds, carries him to sustained help, and pays for his care into the future.

This parable demonstrates a spontaneous compassionate response to the victim’s situation combined with an effective remedy. In this parable, Jesus teaches that everyone is our “neighbor,” regardless of any other social differences and so is deserving of our merciful and loving response. Mercy is an empathic response to another’s suffering, a capacity to respond affectively to the plight of another, as we would hope another would respond to us were we in his or her situation. The compassionate person suffers with, feels the pain of another, deeply honoring the other’s humanity. Mercy recognizes a shared humanity with the other, compelling a response in action. Jesus is shown weeping, deeply moved, tender, etc. even before he heals or restores life. He is first affected emotionally by the other person and their particular suffering, then responds.

In yet another parable which correlates the works of mercy with the beatitudes, Jesus clearly sets the standard of Christian life. Those who have developed a life-long habit of compassion will be judged worthy to enter the kingdom of heaven. Jesus identifies himself with every form of suffering person, the hungry, the thirsty, the homeless stranger, the naked, the sick, the prisoner, and the unburied dead. He astonishes his hearers by asserting that what you have done for these suffering people you have done to me (Matt. 25:31-46). These compassionate responses later became known as the corporal works of mercy. Jesus, as the face of God’s mercy, embodied mercy in the way He related to people, in His teaching, and in His aspirations for his disciples.

**DEVELOPING A HABIT OF MERCY**

If we are to be mercy, we need to cultivate this “habit of the heart” in the way we choose “to live in the mercy of God” (Levertov, 30-2). If we have not experienced God’s compassionate response to us in our own suffering, or through the compassionate response of another, it is all the more difficult to develop empathy toward the suffering of another; we learn mercy through experiencing the compassionate response of others toward us in our need. Catherine McAuley deeply believed that contemplative prayer, living in the presence and the mercy of God, was the necessary corollary to doing the spiritual and corporal works of mercy on a daily basis. The contemplative experience of oneness with Christ assures us that God’s mercy flows through us and complements our own limited capacity for being merciful. When we are rooted in our relationship with God, our deeds of mercy and compassion concretely express God’s mercy.

Developing this habit of mercy involves both recognizing and receiving this gift of the mercy
of God in our prayer and practicing it in our own lives. Moral theologian Richard Gula writes about the necessity of developing the virtues that are expressed as the fruits of the spirit and the spiritual and corporal works of mercy (2011, 25). He emphasizes that “making moral choices is not so much a matter of principles and consequences reigning over our thoughts and actions.” (27) Rather, it is more a matter of developing habits “that help us discern what to do so that we can live well and be good people” (27). He describes virtues as “habits of the heart” inclined toward values. Rooted within us these virtues are ultimately a matter of love. What we are describing is “a way of connecting head, heart, and hands, unifying the whole self in a dynamic way.” If we have cultivated a habit of mercy, we will intuitively recognize in a given situation how to respond mercifully and freely do so because this is who we have become through practice and aspiration. Usually, in most instances we respond out of such developed habits rather than having the luxury of engaging in considered moral reflection.

**COMPASSION RECEIVED ENABLES US TO BE COMPASSIONATE TO SELF AND OTHERS**

Compassion arises from an empathic and generous heart. It is often the result of having experienced empathic responses from another - a parent, a sibling, a friend - to our own suffering, which elicits a similar response from us to another’s pain or suffering. We often learn from another’s response to us the healing and humanizing effects of such responses. As a result, we are able to be compassionate toward our own suffering as well as to that of others. Since mercy is also effective action, we learn a repertoire of responses from significant others who respond in compassionate and effective ways to our suffering or the pain of others.

Every person’s suffering is both unique yet similar to another’s. Over time, we develop a habit of mercy which draws on a depth of experience as to how we could respond in a given situation. This becomes a kind of practical wisdom— an attitude of the heart combined with discerning and effective action. Such virtue is its own reward. We experience congruence between our aspiration to be merciful persons and our ability to live in such a fashion. Compassionate love poured out on us inspires and motivates us to “go and do likewise” (as Jesus advised the lawyer in Luke 10). Relieving suffering increases our sense that we make a difference in our world, and thus urges us onward toward the next empathic response. The recipient of our care may in turn respond in like fashion to another suffering person, and the cycle goes on.

**MERCY IN RELATIONSHIPS**

Patricia Smith, RSM, draws on a definition from theologian Wendy Farley to describe what this process looks like. “Mercy is a mode of relationship and a power. Wounded (but not destroyed) by the suffering of others. Propelled to action, now.” She writes:

Mercy is a mode of relationship, not a momentary or sporadic feeling. It is, rather, a habit of the mind and heart, a way of organizing and interpreting the world. It is an enduring approach to the world. And, like any relationship, it is a two-way-street.

**AND A POWER.**
This is the exciting, challenging part. Mercy

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is only what it is when it is effective—when it survives against great odds and when it empowers all who come within its orbit of care. Because mercy opposes injustice and whatever is degrading, it is likely to involve danger. Conflict is inevitable; struggle enduring. Courage is needed, as never before, in our time.

**WOUNDED (BUT NOT DESTROYED) BY THE SUFFERING OF OTHERS.**

If Mercy is compassion, or “suffering with,” it is also comfort, or “standing strong with.” An inner-city minister in Baltimore put it beautifully: “Mercy is justice in tears.”

**PROPELLED TO ACTION.**

Propelled is a very active verb. It says that mercy is God’s empowering presence in the world, a presence known only in and through those who act in God’s merciful name. …

**NOW.**

The God of mercy does not wait to care for us at the end of our lives or at the end of time. This God cares for us during all time. Made in this God’s image, we are exhorted by Mother Jones: “Pray for the dead, but fight like hell for the living.” This means practical action. Now. (1994, 10)

**MERCY MUST GO TO THE ROOT CAUSES**

A major development since the middle of the 20th century has been the conviction and insight that “mercy” necessarily includes social justice as a way to overcome social sin. Rather than simply and continuously extending mercy, we need to ask questions about the structural causes of suffering. True compassion addresses the root causes of suffering and also asks questions about our unconscious complicity in those structures. Today, our preferred language for social sin is “structural sin” to describe the harm done to the countless majority of people in the world through the on-going functioning of social systems designed to benefit the privileged few at the expense of the vast majority. The systemically privileged do not experience any particular sense of guilt since these systems largely operate without our express permission. The privileged experience blindness rather than guilt.
We have witnessed growing gaps of inequality within U.S. culture so that the 1% and the 2% are flourishing at the expense of the 98%. But this growing inequality in our nation pales before the reality that the vast majority of the world's population is experiencing even greater suffering because of our systemic environmental, political, military, and economic exploitation of the human and material resources of our world.

Today, mercy as a habit of the heart must expand to include the neighbor we cannot see, whose lands are despoiled by our waste and our extraction of their natural resources for our economic benefit. South African theologian, Albert Nolan, less than ten years ago wrote about the globalization of compassion and desires for peace and justice (2006). He is confident that the systemic effects of negative globalization are being met by grassroots movements embodying a corresponding globalization of the virtues needed to combat the worst effects of irresponsible capitalism.

Theologian Maureen O’Connell (2009) writes poignantly about the need to develop political compassion as a way of loving our neighbor in an age of globalization. Framing her ethical reflections in the language of the “Parable of the Good Samaritan,” she says, “…globalization has blurred the distinction between those who innocently travel and those who rob others of their dignity along the way. Today, the road grows more and more treacherous for more and more people. Consequently, Samaritanism means we must integrate loving our suffering neighbors with seeking their forgiveness for our participation in the sins of individualism, consumerism, and privilege” (206).

**CULTURAL BARRIERS TO THE FOLLOWERS OF MERCY**

While all of us have heard these social critiques before, we must admit that it is very difficult to “see through” the cultural context (illusion) in which we live. Individualism is a pervasive invitation to experience our world and our place in it, exclusively as individuals. Will I be better off? Will I benefit from some proposal?
We are not encouraged to reframe the question, “How will this action/decision cause a host of others to suffer want, exploitation, or loss of the necessary conditions for life?” Very little in the hyper-connected world of our media helps us perceive our connection to the causes of others’ suffering. Are we in any way responsible for the flood of immigration (legal or undocumented) because of our trade agreements and the economic disadvantages for people living south of our border? We are not tutored by our culture to question what is being done in our name governmentally and commercially.

Within our society, we have become consumers rather than citizens. In the face of 9/11 we were told “to go shopping at the mall” when most people wanted to stay home and be close to their families. We often fail to wonder what the consequences might be for women in India, Bangladesh, China, or Sri Lanka who produce much of the clothing we wear at prices that are nearly as low as the cost to mail an item within the US. If we fail to buy these goods, what would happen? After all, they are already here. Such artificially low prices perpetuate harsh working conditions for those who actually produce these goods and who receive very little benefit proportionate to their long hours of labor. When consumers go shopping, they don’t tend to consider possible social consequences elsewhere.

Privilege for us is largely a function of systemic racism that goes on in the unacknowledged background of life that systemically maintains “white privilege.”

Our failure within the US to dismantle systemic racism continues to haunt us. Attention at the present is on policing practices all over the country where we white people are discovering what every person of color has long known about how they can expect to be treated by the police who are supposed to keep everyone safe. We who are white fail to recognize why we frequently live in relative safety while others live in constant danger.

PERSONAL CHARITY IS NOT ENOUGH; WE NEED COMMUNITIES THAT CHALLENGE US TO FACE THE TRUTH

Growing in political compassion as described by O’Connell will take a great deal of effort on our part because compassion is frequently privatized as purely personal charity in many Christian contexts. After we uncover our connections to the causes of others’ suffering, we will still need “to interpret the social contexts of suffering” (206) through hearing the stories of those who suffer albeit usually unknown to us but at our collective hands. This will lead us, in this analysis “to real relationships with real people who seek a common goal” (206). O’Connell promises these more complex ways of reflecting with others and joining with bands of socially conscious and self-aware people who accept the challenge to free their neighbors from the oppressive processes of globalization” (206-7) will also “free themselves from its dehumanizing values and practices” (207). What is most important in this analysis is that this growth in compassion requires communities of one kind or another. This is a process of deeper reflection and social connection across differences. It cannot be done in isolation but only in community.

Developing virtuous habits is a life-long process. We become more merciful when we live in this

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flow of mercy and when we continue to learn how to be more merciful. The psalmist sings: “Mercy (steadfast love) and faithfulness will meet; justice and peace shall kiss, justice shall spring up from the earth” (Ps. 85). We continue to deepen our capacities for mercy when we hold mercy and social justice together.

INTERRUPTIONS OF MERCY

What impairs or interrupts this flow of mercy, originating in God’s mercy toward us and enjoined on us as part of the love command? There are both psychological impairments to our compassion as well as forms of cultural distraction that interrupt compassion. Unfortunately, forms of cultural distraction cannot be dealt with in the space allotted for this essay.

DISTANCING OR FUSING WITH THE OTHER

From a psychological perspective, a genuinely compassionate person has a developed capacity for empathy. Empathy has both an affective and cognitive dimension. “Empathy is the ability to tolerate the tension of being truly open to the experience of another, the ability to attempt actively to understand the subjective world of the other and at the same time to remain a differentiated person” (Musgrave, 2003, 10).

Empathy leads us to respond to the felt and understood reality of others without fusing with them, replacing their thoughts and feelings with ours, or distancing ourselves from them. It is a real connection with them in which we genuinely respond to them, demonstrating we are really listening and understanding their world regardless of how different it may be from our own. This capacity to feel with and think with another suffering person will cause us pain. Compassion literally means “with suffering.” We suffer with others without fusing with them, without replacing their thoughts and feelings with our own, or distancing ourselves from them to ward off the pain of their suffering. There is perhaps nothing more comforting than experiencing a genuinely empathic presence from another whether a friend, clinician, teacher, or person in pastoral ministry.

ANY IMPAIRMENT OF EMPATHY WILL INTERRUPT OUR CAPACITY TO BE COMPASSIONATE

If we cannot tolerate another’s world view, we are likely to shut down emotionally and distance ourselves. Our contemporary culture tends to encourage us to stay fixed in our point of view and to reject or ignore the points of view of those who differ from us; quite often the most convenient way to handle a situation is by distancing ourselves. Equally disruptive of compassion is the other extreme, the tendency to fuse with another. To over identify with a person can cause us to replace their particular suffering and their feelings with our own, thereby denying their feelings and the uniqueness of their particular experience. Empathy means being with the other without either fusion or distancing, both of which will interrupt our attempts to be compassionate when something about the other person’s thoughts or feelings is more than we can handle.

PERSONALITY DISORDERS

Persons who suffer from major personality disorders (such as Schizoid, Antisocial, Borderline, and Narcissism) are all incapable of compassionate responses to another’s suffering because of their own personality deficiencies. By definition a “Personality Disorder” is “an enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual’s culture.” It is marked by how they perceive and interpret self, other people and events, how they relate emotionally, and how they function interpersonally (DSM-IV, 1995, 275-286). Persons who suffer from any of these disorders do not have the capacity to be genuinely empathic or to really care about other persons and their well-being. Their particular “disorder” renders them incapable of altruistic compassion for another. Their own suffering will impair their capacity to respond mercifully to another and they may often be unable to recognize and respond to compassion others may show for them.
Burn-out and compassion fatigue have been recognized as potential effects of exposure to traumatic stress in others we might accompany. Among these, burn-out is commonly not understood to be a result of counter-transferential reactions to congregants or clients. Maslach (1982) defined burn-out as “a syndrome of emotional exhaustion, depersonalization and reduced personal accomplishment.”

Simple burnout has also been defined as “…a state of physical, emotional, and mental exhaustion, caused by long term involvement in emotionally demanding situations” (Cited in Figley, 1436). Burnout can be the result of overload, an inability to cope with the intense emotional reactions typical of many ministry encounters as well as those typical for psychologists, social workers, and others in the helping professions. Burnout is a prevalent condition among helping professionals (Maslach and Jackson, 1984).

Conditions within the work environment may also be a major contributing factor as well as other stressors such as long hours, inadequate facilities, and hostility in the workplace (Sprang, Clark, and Whitt-Woosley, 260, 262). Sometimes burn-out indicates a poor fit between one’s basic personality and the demands of many helping professions and may require “changing jobs or careers” (Figley, 1436). Further, Figley clarifies:

Burnout symptoms are categorized as Physical Symptoms (e.g. physical exhaustion, sleeping difficulties, and somatic problems); Emotional Symptoms (e.g. irritability, anxiety, depression, guilt, and a sense of helplessness); Behavioral Symptoms (e.g. aggression, callousness, pessimism, defensiveness, cynicism, avoidance of clients, substance abuse); Work-Related Symptoms (e.g. quitting the job, poor work performance, absenteeism, tardiness, avoidance of work and risk-taking), and; Interpersonal Symptoms (perfunctory communication, inability to concentrate, social withdrawal, lack of a sense of humor, dehumanization and poor interactions) (1436).

Burn-out may go unrecognized by the person experiencing it, and the effect of depersonalization seriously interrupts or impairs one’s capacity for demonstrating compassion for another.

Compassion fatigue was defined by Figley (2002) as “a state of tension and preoccupation with the traumatized patients by re-experiencing the traumatic events, avoidance/numbing of reminders, persistent arousal (e.g. anxiety) associated with the patient. It is a function of bearing witness to the suffering of others” (1435). Compassion fatigue is distinct from countertransference in the clinical relationship. Also called “secondary traumatic stress disorder” with symptoms similar to PTSD, it is distinctive in that technically it refers to the suffering of the family who accompany the person with PTSD.

Compassion fatigue names this form of distress in a positive way by acknowledging that “The very act of being compassionate and empathic extracts a cost under most circumstances. In our effort to view the world from the perspective of the suffering, we suffer. The meaning of compassion is to bear suffering. Compassion Fatigue, like any other kind of fatigue, reduces our capacity or our interest in bearing the suffering of others” (Figley, 2002, 1434). Compassion Fatigue differs from burnout and from counter-transference, inasmuch as people suffering from compassion fatigue still care about the people they are helping and have their well-being at heart. Unlike burnout, the family or loved ones still maintain empathy despite their own muted, diminished ability for sustained response. Without empathic response to suffering clients, there would be no compassion fatigue.

According to Figley’s model, compassionate helpers can protect themselves from compassion fatigue if they learn how to disengage from their clients after sessions and also develop a sense of satisfaction at what has been accomplished. These two factors can diminish “residual compassion stress” caused by preoccupations with a particular client and dissatisfaction with lack of perceived improvement.
Finally, if any life disruption occurs for the helper - illness, life-style changes, professional responsibilities, etc. - the helper may not have the resilience to avoid falling into compassion fatigue. Figley offers the good news that compassion fatigue can be treated in similar ways as PTSD can be managed—desensitization and greater attention to self-care, including sufficient rest and increasing one’s own social support network. I would suggest that not only therapists suffer from compassion fatigue, but many people in the helping professions and ministry are also susceptible.

It is also important to remember that compassion satisfaction is just as important a reality as compassion fatigue. Compassion satisfaction appears to be similar to Figley’s construct for one’s sense of achievement in effectively helping another. Figley says it includes the ability to recognize “where the psychotherapist’s responsibilities end and the client’s responsibilities begin” (1437-8). Sprang, et. al. (2007); he characterized compassion satisfaction as meaning “caregiving is an energy-enhancing experience, increased self-efficacy” (264). Further they found that “specialized trauma training appears to provide clinicians with some protection against compassion fatigue and also enhances compassion satisfaction” (275).

**CONCLUSION**

There is perhaps nothing more rewarding than experiencing the flourishing of another person whose suffering is relieved and whose life is enhanced through our empathic ability, concern and response. These are psychological descriptions of our experience as merciful persons in our world, full of joy in the intrinsic reward of seeing another flourish after a period of distress or suffering, through our attentiveness. “Living in the mercy of God” from a spiritual perspective implies knowledge of how to help others through
our empathic responses as well as the support of clinical assistance for ourselves if we experience signs of compassion stress and an ever deepening relationship with our compassionate God.

We are not the source of compassion. God is. Ultimately our capacity for mediating God’s mercy to the world depends on our ability to participate in God’s compassion. We will still suffer when we experience the pain of others in our world far and near, but we will recognize we are not alone. We will learn how to remain centered in God even while we are engaged in the spiritual and corporal works of mercy, receiving God’s love and compassion ourselves even as we become faces of Christ mediating mercy to suffering women, men, and young people in our world. As Pope Francis puts it, “From the heart of the Trinity, from the depths of the mystery of God, the great river of mercy wells up and overflows unceasingly. It is a spring that will never run dry, no matter how many people draw from it. Every time someone is in need, he or she can approach it, because the mercy of God never ends” (25, 2015).

REFERENCES


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QUESTIONS FOR REFLECTION

“Mercy never stands alone:” it begins with God and flows through us and often comes to us through the goodness and generosity of others. Mercy stands with justice and truth and concrete deeds of service. In my life experience, is mercy/compassion sometimes like a faucet I chose to turn on or off or is it a habit? What steps might I take to make mercy a habit that naturally and spontaneously “works” and shines through me?