







Entry

# Cross-Cultural Psychology and Compassion

Yasuhiro Kotera <sup>1,2,\*</sup> , Noelia Lucía Martínez-Rives <sup>3</sup> , Muhammad Aledeh <sup>4</sup> , Rory Colman <sup>5</sup> ,  
Christian Veasey <sup>6</sup>, Tracey Harrington <sup>7</sup>, Naomi Komori <sup>8</sup>, Akihiko Ozaki <sup>9,10</sup> , Derek Griner <sup>11</sup>, Yumna Ali <sup>12</sup>   
and Elaina C. Taylor <sup>5</sup>

- <sup>1</sup> Faculty of Medicine and Health Sciences, University of Nottingham, Nottingham NG7 2TU, UK  
<sup>2</sup> Center for Infectious Disease Education and Research, Osaka University, Suita 565-0871, Japan  
<sup>3</sup> Department of Psychiatry and Social Psychology, University of Murcia, 30100 Murcia, Spain  
<sup>4</sup> Department of Psychiatry, Wiener Gesundheitsverbund, Klinik Donaustadt, Langobardenstraße 122, 1220 Vienna, Austria  
<sup>5</sup> College of Health, Psychology and Social Care, University of Derby, Derby DE22 1GB, UK  
<sup>6</sup> Derby Business School, University of Derby, Derby DE22 1GB, UK  
<sup>7</sup> School of Nursing, Psychotherapy and Community Health, Dublin City University, D09 V209 Dublin, Ireland  
<sup>8</sup> Department of Nursing, Shonan University of Medical Sciences, Kamakura 247-0066, Japan  
<sup>9</sup> Medical Governance Research Institute, Tokyo 113-8510, Japan  
<sup>10</sup> Department of Breast and Thyroid Surgery, Jyoban Hospital of Tokiwa Foundation, Fukushima 972-8322, Japan  
<sup>11</sup> Counseling and Psychological Services, Brigham Young University, Provo, UT 84602, USA  
<sup>12</sup> Department of Psychology, Hazara University Mansehra, Mansehra 21120, Pakistan  
\* Correspondence: yasuhiko.kotera@nottingham.ac.uk

**Definition:** Cross-cultural psychology evaluates how cultural factors influence people's behaviour and mental processes. Cross-cultural psychology aims to understand individual differences and commonalities, and to develop an appreciation, respect, and knowledge of cultures distinct from one's own. Compassion refers to the emotional response of understanding, empathising with, and desiring to alleviate or reduce the suffering or distress of others. Compassion involves noticing the pain or difficulties another person is experiencing and being motivated to help, often characterised by acts of kindness, support, and caring. This entry paper explores the intersection of these two concepts, illustrating how insights from cross-cultural psychology can contribute to fostering compassion.

**Keywords:** cross-culture; cross-cultural understanding; cross-cultural psychology; compassion; compassionate world



**Citation:** Kotera, Y.; Martínez-Rives, N.L.; Aledeh, M.; Colman, R.; Veasey, C.; Harrington, T.; Komori, N.; Ozaki, A.; Griner, D.; Ali, Y.; et al. Cross-Cultural Psychology and Compassion. *Encyclopedia* **2024**, *4*, 1509–1519. <https://doi.org/10.3390/encyclopedia4040098>

Academic Editors: Fulvio Mazzocchi and Sandro Serpa

Received: 5 September 2024

Revised: 3 October 2024

Accepted: 5 October 2024

Published: 7 October 2024



**Copyright:** © 2024 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<https://creativecommons.org/licenses/by/4.0/>).

## 1. Introduction

This entry article introduces cross-cultural psychology and compassion, and explores the link between the two. Cross-cultural psychology is a branch of psychology that evaluates how cultural factors impact people's behaviour and mental processes. Cross-cultural psychology aims to foster our understanding about differences and commonalities across cultural groups. Compassion, whose word origin is “to suffer together”, is commonly understood as recognising the suffering and distress of others, with a commitment to alleviate or reduce the suffering. Globally, the importance of both cross-cultural psychology and compassion has been increasingly recognised as of late. Cross-cultural psychology is important today for numerous reasons, some of which include that as societies are becoming increasingly multiculturally diverse, in order to better address individual needs (e.g., mental health services) it is imperative to pay attention to and understand diverse worldviews and behaviours. To better understand such worldviews, those in the helping professions must be able to challenge assumptions that are common in a narrow focus on Western, middle-class Caucasians, which has been the dominant view for some time (e.g., research fields) [1,2]. As compassion can lead someone to take action to alleviate suffering, it can also lead to a higher awareness of mental health, higher quality of healthcare,

and increased professional ethics and social harmony [3–5]. We will discuss how these two concepts of multiculturalism and compassion are linked, and inform each other.

## 2. What Is Cross-Cultural Psychology?

Cross-cultural psychology critically and comparatively examines how culture influences human psychology. Culture is commonly understood as “a set of attitudes, behavior, and symbols shared by a group of people and usually communicated from one generation to the next” [1]. Cross-cultural psychology involves studying and comparing different cultures, drawing conclusions from at least two distinct groups. This comparative approach requires specific critical skills, making cross-cultural psychology inherently linked to critical thinking. Therefore, comparisons and critical thinking are two essential components of cross-cultural psychology [1].

Cross-cultural psychology is different from cultural psychology, because of this comparison aspect. Cross-cultural psychology aims to understand universal behaviours, cultural influences on behaviour, and psychological commonalities across two or more cultures through comparisons [6]. On the other hand, cultural psychology believes that human behaviour is meaningful when evaluated in the sociocultural context where the behaviour occurs [7]. For example, cultural psychologists study how Buddhism impacts people’s behaviours in Cambodia, where Buddhism is their official religion. Cultural psychology focuses more on within-culture factors, whereas cross-cultural psychology focuses more on between-culture factors.

The other component, critical thinking, is also helpful to understand what cross-cultural psychology is. For example, currently psychology research is well-represented by Western, educated, industrialised, rich, and democratic (WEIRD) countries [8]. More than 90% of research participants globally were based in WEIRD countries [8] and yet individuals from WEIRD countries only account for 12% of the world’s population. Psychology research has historically not adequately represented the global population, with researchers primarily holding degrees from European, U.S., and Canadian institutions, which dominate the field of psychological education and research [9]. Does that mean researchers in WEIRD countries are more intelligent than those in non-WEIRD countries? Do more publications mean greater intelligence? To answer these questions, critical thinking is needed. For example, think about the language. In global science, English is the standard language used. High quality journals in many fields, if not all, are written in English. Worldly renowned conferences also use the English language. Non-native English speakers whose mother tongue is very different from English—such as Japanese [10]—require greater reading time, on average twice as long, to read English texts than native English speakers [11]. Many scientific frameworks are based on Western values, and many researchers in non-WEIRD countries may need more time to understand these frameworks: non-WEIRD researchers need to play the game of research in the WEIRD way [12]. There are many other factors to explain the WEIRD dominance in research such as financial, political, educational, and religious differences [13]. Cross-cultural psychology attempts to shed light on these differences by using critical thinking.

The importance of incorporating a cross-cultural psychological point of view to better understand the potentially unique needs of individuals is increasing. For example, the awareness of mental health is increasing in many countries. However, how to adapt an effective intervention in one context to another, i.e., cultural adaptation, remains under-researched [14]. Culturally adapted interventions are markedly more effective than non-adapted ones to the target group [15]. Cross-cultural psychology is essential in cultural adaptation. Likewise, in education, culturally responsive teaching methods are increasingly recognised [16,17]. Culturally responsive teaching integrates students’ cultural backgrounds into every aspect of education. It aims to foster an inclusive and supportive learning environment that honours and appreciates diversity, ultimately enhancing academic outcomes for all students [18]. Cross-cultural psychology is a key enabler for culturally responsive teaching.

### 3. Evidence for Cross-Cultural Psychology

The development of cross-cultural psychology has been enriched by diverse studies and methodologies. For instance, a cross-cultural longitudinal study conducted by Chopik and Kitayama explored how personality traits evolve over time in American and Japanese populations [19]. They found that, while certain traits, such as agreeableness and openness, remain consistent across cultures, others, such as extraversion, neuroticism, and conscientiousness, exhibit significant cultural differences. Notably, Japanese people tend to experience greater changes in their personality traits compared to Americans. Based on a cross-sectional study to identify different types of shame associated with mental health problems [20], Kotera et al. validated the Japanese version of a scale for mental health shame, namely the Attitudes Towards Mental Health Problems Scale [21], which was originally developed in the UK [22]. Ethnographic research, such as Unsworth's study on the role of cloud-based collaborative technologies in shaping teachers' classroom practices, offered a valuable framework for understanding how these tools are integrated into diverse cultural contexts [23]. The insights from these and other studies can be used to improve mental health and educational practices globally. Moreover, systematic reviews, like the one by Martínez-Rives et al. comparing suicide interventions in Spain and Japan [24], and meta-analyses, such as Salgado and Moscoso's exploration of the relationship between subjective well-being and job performance [25], provide a broader understanding of cross-cultural phenomena. In well-being research, cross-cultural differences were reported indicating that culture does indeed matter [26]. In neuroscience and psychiatry research, the importance of cross-cultural comparison has been increasing [2]. Researchers have found that mental health cannot be fully understood without considering the culture of the contexts [27], and culture impacts how we think and feel and even impacts size differences in some parts of the brain [28].

Evidence syntheses have been also reported. Hosseini et al.'s [29] systematic review on interventions to improve mental health among Afghan refugees highlights the importance of culturally adapting these interventions to enhance their effectiveness. This includes considering language, cultural values, beliefs, and practices. In another example of a cross-cultural meta-analysis, Hanke and Vaclair investigated forgiveness across 30 countries and demonstrated how cultural context influences the importance of forgiveness and its social consequences [30]. Their study offers practical recommendations for promoting forgiveness to improve interpersonal relationships and mental health across different cultures, potentially guiding global reconciliation efforts. Other significant studies include Lee et al.'s [31] review of cross-cultural psychotherapy, which categorises findings by topics such as therapist competence and therapy processes. Lee and colleagues found that, particularly in Muslim regions of Eurasia and North Africa, compassion is highly valued, often surpassing racial and ethnic considerations.

Over-emphasis on differences between cultures is one common criticism for cross-cultural psychology research [32]. While cross-culture may imply that this approach solely focuses on differences across cultures, reporting similarities across cultures is also an important aspect of cross-cultural psychology. A notable example of this is a large-scale study led by Schmitt [33]. This study recruited over 16,000 participants from 52 nations. They found consistent sex differences in the desire for sexual variety, with men generally exhibiting a stronger desire than women, supporting evolutionary theories of sexual selection.

Other criticisms of cross-cultural psychology relate to theoretical and methodological challenges, such as inadequate definitions and measurements of cultural factors and psychological phenomena, as well as faulty data analysis and conclusions [34]. The definition of "culture" is still being debated [32]. Additionally, some cross-cultural psychology studies are criticised for their implicit assumptions and approaches, including issues related to epistemology, universality, and the individualism/collectivism dichotomy [35]. These critiques highlight the need for critical approaches to cross-cultural psychological research [1].

#### 4. Compassion

Compassion is a complex and multifaceted concept with various definitions. The term “compassion” originated in the 14th century from the Latin roots “com-” (together) and “pati” (to bear or suffer), indicating a deep awareness and desire to alleviate or reduce others’ suffering. The Oxford Dictionary defines it as “a sympathetic pity and concern for the sufferings or misfortunes of others” [36]. However, this definition is limited as it does not connect the feeling of sympathy to the intent to “take action”. A more comprehensive definition may be the “sympathetic consciousness of others’ distress together with a desire to alleviate it” described in the Merriam-Webster Dictionary [37]. This aligns with scientific definitions, encompassing awareness of, and empathy towards, others’ suffering, along with the motivation to help alleviate that suffering [38]. Lazarus defines compassion as “being moved by another’s suffering and wanting to help” (p. 289) [39], while Goetz et al. (2010) describe it as “the feeling that arises in witnessing another’s suffering and that motivates a subsequent desire to help” (p. 351) [40]. Compassion for oneself is called self-compassion. Self-compassion is frequently evaluated in compassion research [41], defined as “being supportive toward oneself when experiencing suffering or pain—be it caused by personal mistakes and inadequacies or external life challenges” [42].

Compassion is often used interchangeably with empathy, sympathy, caring, and altruism, but these terms do not fully capture the essence of compassion. Empathy and sympathy involve understanding and sharing others’ feelings, while compassion specifically elicits a desire to alleviate or reduce suffering [43]. For example, a person can donate money to a charity for a tax write-off, which is altruistic but not necessarily compassionate. Schantz notes that only compassion compels people to act to remove another’s suffering or pain [44]. Empathy, a more recent term coined in the 20th century as a translation of the German word “Einfühlung”, involves understanding and sharing another person’s feelings.

Compassion is central to the core teachings of most religions, particularly in Buddhist philosophy. The Dalai Lama, defines compassion as “an openness to the suffering of others with a commitment to relieve it.” [45]. Compassion is considered an evolutionary trait necessary for survival [46,47], and it can be cultivated or blocked. The Dalai Lama emphasises the need to develop genuine sympathy for others to instill the motivation and will to help remove pain [43]. Genuine compassion combines wisdom and loving-kindness, understanding the nature of suffering, and experiencing deep empathy [45]. Feldman and Kuyken [48] describe compassion as recognising the universality of pain in human experience and meeting that pain with kindness, empathy, equanimity, and patience.

From a scientific perspective, compassion involves: (1) awareness of another’s suffering (noticing), (2) a benevolent emotional response (feeling), and (3) a desire and motivation to help alleviate or reduce this suffering (responding), which implies cognitive components involving imagining and reasoning about a person’s experiences [49]. Jinpa et al. define compassion as a multidimensional construct comprising four components: (1) an awareness of suffering (cognitive), (2) sympathetic concern arising from emotionally being moved by suffering (affective), (3) a wish/desire to relieve that suffering (motivational), and (4) responsiveness to help alleviate or reduce suffering (intentional) [50]. Culture can influence the way that compassion is viewed and understood. For example, in some Latin cultures, compassion is understood as the recognition of suffering and the attempt to alleviate it [51]. In South Asia, healthcare patients described compassion as helping, kindness, consideration, understanding, and viewing the patient as a person [52]. In Japanese, a commonly translated term for compassion is ‘Omoiyari’, which refers to an active concern for others’ well-being and a selfless desire to understand their needs and perspectives [53].

Gilbert and Choden combine Eastern and Western traditions to define compassion as “a sensitivity to suffering in self and others with a commitment to try to alleviate and prevent it” (p. 94) [54]. This definition highlights two crucial elements: engaging with suffering and the dedication to alleviate and prevent it [55]. Engaging with suffering requires motivation, willingness, courage, and distress tolerance. Alleviation and prevention involve acquiring

the skills to effectively relieve suffering. Unlike nonhuman caring, human compassion involves discernment and reasoning, requiring thoughtful consideration and judgment to determine the best course of action [55].

In summary, compassion involves awareness of suffering, being emotionally moved by it, and acting to help. It requires tolerating uncomfortable feelings that arise in oneself and recognising commonality with the sufferer. Compassion is a multidimensional response that combines emotional, cognitive, and behavioural elements to effectively alleviate or reduce suffering.

## 5. Evidence for Compassion

Global perspectives on compassion reveal both universal and culturally specific elements. Research and reviews highlight a shared understanding of compassion as an empathetic response to others' suffering with a desire to alleviate it [56]. This universal aspect underscores the fundamental human connection and commonality across diverse cultures.

Within Western psychology, compassion is bolstered through diverse interventions designed to enhance mental well-being. Compassion is conceptualised as influenced by evaluations of costs and benefits, including assessments of responsibility for the origins of suffering [57]. In Eastern traditions, compassion is integral to religious and philosophical doctrines. In Buddhism, the philosophical doctrine of Theravada emphasises practices such as metta (loving-kindness) and karuna (compassion); other philosophical doctrines of Mahayana emphasise interconnected compassion; and Vajrayana sees compassion as innate, realised through rituals and meditation. In Hinduism and Jainism, compassion (karuna) is central, advocating non-violence (ahimsa) and empathy towards all living beings [58]. In South Asian organisations, compassion was essential to bolster work commitment [59]. Among Iranian mental health professionals, compassion was associated with higher tolerance to job stress [60,61].

Recent systematic reviews and meta-analyses have investigated compassion across various cultures, emphasising both commonalities and differences across cultures. However, a significant meta-analysis of 79 studies involving 16,416 participants demonstrated that self-compassion is beneficial universally and significantly associated with well-being [62]. This aligns with research suggesting that emotion regulation is pivotal in understanding this link, highlighting the value of self-compassion in managing emotional difficulties [63].

Increased self-compassion is associated with reduced symptoms of mental health disorders, consistently enhancing mental well-being and resilience across various age groups and genders, emphasizing its broad relevance [3]. Another study proposed that emphasizing self-compassion could be pivotal in interventions targeting psychological distress and enhancing well-being among young individuals [64].

In healthcare, a systematic review underscored both shared characteristics and cultural divergences in the expression of compassion across varied communities. It underscored the necessity for culturally attuned interventions to enhance compassionate caregiving, addressing barriers such as language and cultural norms [65]. Ongoing research into self-compassion among diverse populations aims to catalyse a further empirical exploration of this nurturing mindset. Acquiring self-compassion through tailored interventions presents a promising strategy for navigating life's challenges and fostering inner well-being [66].

In summary, these reviews underscore the universal acknowledgment of compassion's fundamental principles. However, they also emphasise the critical importance of tailoring interventions to accommodate the diverse cultural contexts in which compassion is expressed. This adaptation is essential for effectively promoting compassion on a global scale, ensuring that interventions resonate authentically and meaningfully across different societies and communities.



## 6. Compassion in Cross-Cultural Psychology

Though compassion's positive impact on mental health is consistent across cultures, how cultures impact compassion is reported to differ across cultures. In a cross-cultural study, involving 4124 participants from 11 purposively sampled datasets, the self-compassion scale [67] and normative scores on the cultural values of these countries based on Hofstede's cultural dimension theory [68], were evaluated [69]. The results indicate that cultural values significantly influence the structure and expression of self-compassion. Specifically, variations in cultural contexts, such as Individualism and Success-Drivenness [70] (a dimension originally called "Masculinity"), were found to be associated with differences in self-compassion components, including the balance of positive (i.e., self-kindness, common humanity, and mindfulness) and negative (i.e., self-judgment, isolation, and over-identification) items in self-compassion assessments. The positive items were more significant in capturing the traits that comprise self-compassion when a culture values Long-Term Orientation (emphasising traditions and future rewards) highly. In contrast, negative items did not significantly contribute to defining self-compassion when Individualism was high, though there were moderate effects observed. Furthermore, the commonalities in self-compassion traits decreased as Indulgence increased. That is, people in Individualistic cultures may experience and express self-compassion in more diverse ways than those in Collectivistic cultures. These findings indicate that the contribution of positive and negative items to self-compassion, and how different facets of self-compassion are perceived as part of a broader construct, varies across different cultural contexts.

Goetz et al. [40] and Strauss et al. [71] posit that cultural variations in compassion are largely influenced by three major factors: cultural values, religious beliefs, and social norms [4,5]. Research has shown that the capacity for humans to show compassion is universal and deeply rooted in cultural contexts [40]. However, the norms governing the expression of compassion vary significantly across diverse cultures, e.g., in collectivist cultures such as in many Asian countries [72,73]. In East Asia, for example, compassion is often expressed through actions, reinforcing group harmony and interdependence [40]. In Individualistic cultures like those in the West, e.g., the United States, compassion is often expressed through individualistic acts of kindness and emotional support [74].

Kariyawasam et al.'s study found that Sri Lankans reported higher self-compassion but also a greater fear of compassion and external shame compared to UK participants [72]. Similarly, Singaporeans showed higher self-compassion but lower compassion towards others compared with Australians [73]. Cultural norms influence compassion expression, with Collectivistic cultures potentially hindering compassion towards others while facilitating self-compassion [73]. The desire to avoid negative emotions partly explains cultural differences in compassion expression [75]. Researchers who conducted a meta-analysis investigated associations between self-compassion and life satisfaction and identified that although self-compassion was associated with life satisfaction, the association was stronger in Individualistic cultures than Collectivistic cultures [76]. Another meta-analytic review reported that Dialectic cultures (embracing and tolerating contradictions, change, and ambiguity) influenced the relationship between the positive and negative aspects of self-compassion, with dialectical cultures displaying weaker connections between these two contrasting components [77]. Another study showed the importance of ways that compassion may manifest in different ways when individuals from Canada and Spain were found to have similar associations between personality traits and compassion, and yet they found that agreeableness predicted a compassionate response only among Canadians. Thus, we can see that culture does indeed matter when we work to understand cross-cultural perceptions of compassion [78]. Beyond mental health work, another study has shown the importance that compassion plays for individuals from both Bangladesh and Saudi Arabia in starting a social venture [79]. As compassion is a complex construct, more cross-cultural research on compassion is needed.

## 7. How Cross-Cultural Psychology Can Help Compassion

As described above, cross-cultural psychology aims to understand people in different cultures by critically comparing psychological issues. Cross-cultural psychologists generally value understanding, which is essential in compassion. When one is able to better understand others' suffering, it is more likely that they will be moved to alleviate or reduce the suffering they see. Greater understanding helps reduce the stigma and prejudice that is often present in stereotypes and quick judgments [80]. Thus, cross-cultural psychology (which focuses on comparisons across cultures) enhances our perspective-taking, deepens our understanding, and helps us see things from different vantage points and perspectives. Policy-makers can benefit from such attitudes of understanding, enabling them to make decisions that serve people in need [81]. In organisations, cross-cultural psychology helps compassionate leadership [82,83]. In families, cross-cultural psychology helps compassionate parenting [84]. These potential benefits help us understand why cross-cultural psychology is used in more recently created branches of psychologies such as green psychology and peace psychology. Green psychology investigates the relationship between human psychology and the natural environment, in order to promote an ecological worldview and sustainable behaviours to benefit both the environment and individuals. Green psychology aims to understand how environmental factors influence our mental health, and how psychological principles can facilitate environmental conservation and sustainable behaviours [85]. Peace psychology focuses on understanding, preventing, and mitigating violence while promoting peace and social justice. Peace psychology was developed during the Cold War (a geopolitical tension between the United States and the Soviet Union from 1947–1991) with an initial focus on preventing nuclear war. Peace psychology has been expanded to address various forms of violence and peacebuilding efforts [86]. These newly developed psychologies aim to save people and the environment. We believe the underlying component to these movements is compassion.

## 8. Future Studies

Though this is an entry paper (not an empirical one), we suggest future studies that focus on compassion across cultures. We first suggest that specific components associated with interventions in compassion training be better defined and identified. This is particularly important for people in low-resources settings who may not have adequate resources to deliver extensive trainings [14]. By identifying which underlying components in compassion training are most important, we can then begin to assess how to best provide such training. Moreover, once we know which components of compassion training are the most important and effective in helping individuals, we will be better able to research how to implement and measure the success of such components. The mechanisms of action in compassion interventions need to be established [87]. Lastly, while compassion research has been done in many countries involving diverse populations, there are still many areas where compassion interventions have not been used. More different populations need to be approached using practical compassion interventions.

## 9. Conclusions

This entry paper has explored the concepts of cross-cultural psychology and compassion, highlighting the connection between the two. Cross-cultural psychology aims to understand the behaviours and mental processes of people from different cultures, and understanding is essential to compassion. While evidence has been established in both fields, more research can be done in the intersection between them—namely, the cross-cultural psychology of compassion. We hope that readers are inspired to engage in research and practice within these domains, contributing to the advancement of knowledge and interventions that can assist those in need globally.

**Author Contributions:** Conceptualization, Y.K.; validation, Y.K., N.L.M.-R., M.A., C.V. and T.H.; investigation, Y.K., N.L.M.-R., M.A., C.V. and T.H.; writing—original draft preparation, Y.K., N.L.M.-R., M.A., C.V. and T.H.; writing—review and editing, Y.K., N.L.M.-R., M.A., R.C., C.V., T.H., N.K., A.O., D.G., Y.A. and E.C.T.; project administration, Y.K. All authors have read and agreed to the published version of the manuscript.

**Funding:** This research received no external funding.

**Institutional Review Board Statement:** Not applicable.

**Informed Consent Statement:** Not applicable.

**Data Availability Statement:** Not applicable.

**Conflicts of Interest:** The authors declare no conflicts of interest.

## References

- Shiraev, E.B.; Levy, D.A. *Cross-Cultural Psychology*, 8th ed.; Routledge: London, UK, 2024; p. 546.
- Kirmayer, L.J.; Worthman, C.M.; Kitayama, S.; Lemelson, R.; Cummings, C.A. (Eds.) *Culture, Mind, and Brain: Emerging Concepts, Models, and Applications*; Cambridge University Press: Cambridge, UK, 2020.
- MacBeth, A.; Gumley, A. Exploring compassion: A meta-analysis of the association between self-compassion and psychopathology. *Clin. Psychol. Rev.* **2012**, *32*, 545–552. [CrossRef] [PubMed]
- Fotaki, M. Why and how is compassion necessary to provide good quality healthcare? *Int. J. Health Policy Manag.* **2015**, *4*, 199–201. [CrossRef] [PubMed]
- Gilbert, P. The Evolution and Social Dynamics of Compassion. *Soc. Personal. Psychol. Compass* **2015**, *9*, 239–254. [CrossRef]
- Silvestri, M.M.; Buskist, W. Cross-Cultural Psychology. In *The Encyclopedia of Cross-Cultural Psychology*; John Wiley & Sons, Inc.: Hoboken, NJ, USA, 2013; pp. 274–275.
- Heine, S.J.; Ruby, M.B. Cultural psychology. *WIREs Cogn. Sci.* **2010**, *1*, 254–266. [CrossRef] [PubMed]
- Henrich, J.; Heine, S.J.; Norenzayan, A. The weirdest people in the world? *Behav. Brain Sci.* **2010**, *33*, 61–83; discussion 83–135. [CrossRef]
- Lonner, W.J. A Golden Anniversary Editorial. *J. Cross-Cult. Psychol.* **2019**, *50*, 151–163. [CrossRef]
- Eester, M.N.-V. “Linguistic Distance” and Its Influence on TESOL (Teaching English to Speakers of Other Languages). Available online: <https://core.ac.uk/download/pdf/229746826.pdf> (accessed on 3 October 2024).
- Lenharo, M. The true cost of science’s language barrier for non-native English speakers. *Nature* **2023**, *619*, 678–679. [CrossRef]
- Kotera, Y.; Ronaldson, A.; Hayes, D.; Hunter-Brown, H.; McPhilbin, M.; Dunnett, D.; Jebara, T.; Takhi, S.; Masuda, T.; Camacho, E.; et al. Cross-Cultural Insights from Two Global Mental Health Studies: Self-Enhancement and Ingroup Biases. *Int. J. Ment. Health Addict.* **2024**. [CrossRef]
- Bhugra, D.; Bhui, K. (Eds.) *Textbook of Cultural Psychiatry*, 2nd ed.; Cambridge University Press: Cambridge, UK, 2018; p. 680.
- Kotera, Y.; Taylor, E.; Brooks-Ucheaga, M.; Edwards, A.M. Need for a tool to inform cultural adaptation in mental health interventions. *ISSBD Bull.* **2023**, *1*, 2–5.
- Ellis, D.M.; Draheim, A.A.; Anderson, P.L. Culturally adapted digital mental health interventions for ethnic/racial minorities: A systematic review and meta-analysis. *J. Consult. Clin. Psychol.* **2022**, *90*, 717–733. [CrossRef]
- Caingcoy, M. Culturally responsive pedagogy. *Divers. J.* **2023**, *8*, 3203–3212. [CrossRef]
- Kotera, Y.; Chircop, J.; Hutchinson, L.; Rhodes, C.; Green, P.; Jones, R.-M.; Kaluzeviciute, G.; Garip, G. Loneliness in online students with disabilities: Qualitative investigation for experience, understanding and solutions. *Int. J. Educ. Technol. High. Educ.* **2021**, *18*, 64. [CrossRef] [PubMed]
- Abdulrahim, N.A.; Orosco, M.J. Culturally Responsive Mathematics Teaching: A Research Synthesis. *Urban. Rev.* **2020**, *52*, 1–25. [CrossRef]
- Chopik, W.J.; Kitayama, S. Personality change across the life span: Insights from a cross-cultural, longitudinal study. *J. Pers.* **2018**, *86*, 508–521. [CrossRef]
- Kotera, Y.; Sheffield, D.; Green, P.; Asano, K. Cross-Cultural Comparison of Mental Health Shame: Negative Attitudes and External, Internal, and Reflected Shame About Mental Health in Japanese and UK Workers. In *Shame 4.0*; Springer: Cham, Switzerland, 2021; pp. 55–71. [CrossRef]
- Kotera, Y.; Asano, K.; Jones, J.; Colman, R.; Taylor, E.; Aledoh, M.; Barnes, K.; Golbourn, L.M.; Kishimoto, K. The development of the Japanese version of the full and short form of Attitudes Towards Mental Health Problems Scale (J-(S) ATMHPS). *Ment. Health Relig. Cult.* **2023**. [CrossRef]
- Gilbert, P.; Bhundia, R.; Mitra, R.; McEwan, K.; Irons, C.; Sanghera, J. Cultural differences in shame-focused attitudes towards mental health problems in Asian and Non-Asian student women. *Ment. Health Relig. Cult.* **2007**, *10*, 127–141. [CrossRef]
- Unsworth, R. Teaching through the cloud: An ethnography of the role of cloud-based collaborative technologies in the formation of teachers’ classroom practices. *Anthropol. Educ. Q.* **2024**, *55*, 24–42. [CrossRef]



24. Martínez-Rives, N.L.; Martín Chaparro, M.D.P.; Dhungel, B.; Gilmour, S.; Colman, R.D.; Kotera, Y. Suicide Interventions in Spain and Japan: A Comparative Systematic Review. *Healthcare* **2024**, *12*, 792. [\[CrossRef\]](#)
25. Salgado, J.F.; Moscoso, S. Cross-cultural evidence of the relationship between subjective well-being and job performance: A meta-analysis. *Rev. Psicol. Trab. Las. Organ.* **2022**, *38*, 27–42. [\[CrossRef\]](#)
26. Lomas, T. Positive cross-cultural psychology: Exploring similarity and difference in constructions and experiences of wellbeing. *Int. J. Wellbeing* **2015**, *5*, 60–77. [\[CrossRef\]](#)
27. Kirmayer, L.J.; Ryder, A.G. Culture and psychopathology. *Curr. Opin. Psychol.* **2016**, *8*, 143–148. [\[CrossRef\]](#) [\[PubMed\]](#)
28. Yu, Q.; King, A.P.; Yoon, C.; Liberzon, I.; Schaefer, S.M.; Davidson, R.J.; Kitayama, S. Interdependent self-construal predicts increased gray matter volume of scene processing regions in the brain. *Biol. Psychol.* **2021**, *161*, 108050. [\[CrossRef\]](#) [\[PubMed\]](#)
29. Hosseini, Z.; Syed, H.; Raza, Z.; Mansouri, M.; Magan, I.M.; Awaad, R. A Systematic Review of Evidence-Based Interventions for Afghan Refugee Mental Health: A Cultural Adaptation Analysis. *J. Cross-Cult. Psychol.* **2023**, *55*, 25–46. [\[CrossRef\]](#)
30. Hanke, K.; Vaclair, C.-M. Investigating the Human Value “Forgiveness” Across 30 Countries: A Cross-Cultural Meta-Analytical Approach. *Cross-Cult. Res.* **2016**, *50*, 215–230. [\[CrossRef\]](#)
31. Lee, E.; Greenblatt, A.; Hu, R. A Knowledge Synthesis of Cross-Cultural Psychotherapy Research: A Critical Review. *J. Cross-Cult. Psychol.* **2021**, *52*, 511–532. [\[CrossRef\]](#)
32. Poortinga, Y. Is “culture” a workable concept for (cross-)cultural psychology? *Online Read. Psychol. Cult.* **2015**, *2*. [\[CrossRef\]](#)
33. Schmitt, D.P.; Alcalay, L.; Allik, J.; Ault, L.; Austers, I.; Bennett, K.L.; Bianchi, G.; Boholst, F.; Cunen, M.A.; Braeckman, J.; et al. Universal sex differences in the desire for sexual variety: Tests from 52 nations, 6 continents, and 13 islands. *J. Pers. Soc. Psychol.* **2003**, *85*, 85–104. [\[CrossRef\]](#)
34. Ratner, C.; Hui, L. Theoretical and Methodological Problems in cross-Cultural Psychology. *J. Theory Soc. Behav.* **2003**, *33*, 67–94. [\[CrossRef\]](#)
35. Stead, G.B.; Poklar, A.E. Cross-cultural career psychology from a critical psychology perspective. In *The Oxford Handbook of Career Development*; Robertson, P.J., Hooley, T., McCash, P., Eds.; Oxford University Press: New York, NY, USA, 2021; pp. 238–254. [\[CrossRef\]](#)
36. Stevenson, A.; Lindberg, C.A. (Eds.) *New Oxford American Dictionary*, 3rd ed.; Oxford University Press: New York, NY, USA, 2010; p. 2096.
37. Merriam-Webster. *Merriam-Webster’s Collegiate Dictionary*, 12th ed.; Merriam-Webster, Inc.: Springfield, MA, USA, 2024.
38. Gilbert, P. Introducing compassion-focused therapy. *Adv. Psychiatr. Treat.* **2009**, *15*, 199–208. [\[CrossRef\]](#)
39. Lazarus, R.S. Cognition and motivation in emotion. *Am. Psychol.* **1991**, *46*, 352–367. [\[CrossRef\]](#)
40. Goetz, J.L.; Keltner, D.; Simon-Thomas, E. Compassion: An Evolutionary Analysis and Empirical Review. *Psychol. Bull.* **2010**, *136*, 351–374. [\[CrossRef\]](#) [\[PubMed\]](#)
41. Kotera, Y.; Beaumont, J.; Edwards, A.-M.; Cotterill, M.; Kirkman, A.; Tofani, A.C.; McPhilbin, M.; Takhi, S.; Barnes, K.; Todowede, O.; et al. A Narrative Review of Compassion Focused Therapy on Positive Mental Health Outcomes. *Behav. Sci.* **2024**, *14*, 643. [\[CrossRef\]](#) [\[PubMed\]](#)
42. Neff, K. *Self-Compassion: Theory, Method, Research, and Intervention*. Guilford Press: New York, NY, USA, 2023.
43. Snyderman, R.; Gyatso, T.D.L. Compassion and Health Care: A Discussion with the Dalai Lama. *Acad. Med.* **2019**, *94*, 1068–1070. [\[CrossRef\]](#) [\[PubMed\]](#)
44. Schantz, M.L. Compassion: A Concept Analysis. *Nurs. Forum* **2007**, *42*, 48–55. [\[CrossRef\]](#) [\[PubMed\]](#)
45. Dalai Lama, X.I.V. *The Power of Compassion*; Thorsons: Etobicoke, ON, Canada, 1995.
46. Darwin, C. *The Descent of Man, and Selection in Relation to Sex*; John Murray: London, UK, 1871; Volume 1.
47. Keltner, D.; Marsh, J.; Smith, J.A. (Eds.) *The Compassionate Instinct*; WW Norton: New York, NY, USA, 2010; p. 336.
48. Feldman, C.; Kuyken, W. Compassion in the landscape of suffering. *Contemp. Buddhism* **2011**, *12*, 143–155. [\[CrossRef\]](#)
49. Kanov, J.M.; Maitlis, S.; Worline, M.C.; Dutton, J.E.; Frost, P.J.; Lilius, J.M. Compassion in Organizational Life. *Am. Behav. Sci.* **2004**, *47*, 808–827. [\[CrossRef\]](#)
50. Jazaieri, H.; Jinpa, G.T.; McGonigal, K.; Rosenberg, E.L.; Finkelstein, J.; Simon-Thomas, E.; Cullen, M.; Doty, J.R.; Gross, J.J.; Goldin, P.R. Enhancing Compassion: A Randomized Controlled Trial of a Compassion Cultivation Training Program. *J. Happiness Stud.* **2013**, *14*, 1113–1126. [\[CrossRef\]](#)
51. Salvador Zaragozá, A.; Soto-Rubio, A.; Lacomba-Trejo, L.; Valero-Moreno, S.; Pérez-Marín, M. Compassion in Spanish-speaking health care: A systematic review. *Curr. Psychol.* **2023**, *42*, 6732–6751. [\[CrossRef\]](#)
52. Singh, P.; King-Shier, K.; Sinclair, S. South Asian patients’ perceptions and experiences of compassion in healthcare. *Ethn. Health* **2020**, *25*, 606–624. [\[CrossRef\]](#)
53. Mudliar, S. Omoiyari: The Heart of Compassion in Japanese Culture. Medium: San Francisco, CA, USA, 2024.
54. Gilbert, P. *Mindful Compassion*; New Harbinger Publications: Oakland, CA, USA, 2003; p. 384.
55. Asano, K.; Tsuchiya, M.; Ishimura, I.; Lin, S.; Matsumoto, Y.; Miyata, H.; Kotera, Y.; Shimizu, E.; Gilbert, P. The development of fears of compassion scale Japanese version. *PLoS ONE* **2017**, *12*, 0185574. [\[CrossRef\]](#)
56. Gilbert, P. *The Compassionate Mind: A New Approach to Life’s Challenges*; Constable & Robinson Ltd.: London, UK, 2009.
57. Fucci, E.; Abdoun, O.; Baquedano, C.; Lutz, A. Ready to help, no matter what you did: Responsibility attribution does not influence compassion in expert Buddhist practitioners. *J. Exp. Psychol. Gen.* **2024**, *153*, 1093–1111. [\[CrossRef\]](#) [\[PubMed\]](#)

58. Makransky, J. *Wisdom and Compassion in Psychotherapy: Deepening Mindfulness in Clinical Practice*; The Guilford Press: New York, NY, USA, 2012; p. xxiii, 407.
59. Nisar, A.; Abid, G.; Elahi, N.S.; Ahsan Athar, M.; Farooqi, S. Impact of Compassion on Voice Behavior: A Moderated Mediation Model. *J. Open Innov. Technol. Mark. Complex.* **2020**, *6*, 148. [\[CrossRef\]](#)
60. Abbasi Soorashjani, M.; Nikgoo, R.; Farahani, H. The indirect effect of compassion for others in the relationship between mindfulness and therapeutic presence. *Clin. Psychol.* **2023**, *27*, 343–351. [\[CrossRef\]](#)
61. Soltani Delgosha, M.; Vaziri, S.; Shahabizadeh, F.; Ahi, Q.; Mansouri, A. Effectiveness of Compassion-based Treatment in Depression, Anxiety, and Aggression of Emergency Medical Workers with COVID-19. *Avicenna J. Nurs. Midwifery Care* **2023**, *31*, 85–94. [\[CrossRef\]](#)
62. Zessin, U.; Dickhäuser, O.; Garbade, S. The Relationship Between Self-Compassion and Well-Being: A Meta-Analysis. *Appl. Psychol. Health Well-Being* **2015**, *7*, 340–364. [\[CrossRef\]](#)
63. Inwood, E.; Ferrari, M. Mechanisms of Change in the Relationship between Self-Compassion, Emotion Regulation, and Mental Health: A Systematic Review. *Appl. Psychol. Health Well-Being* **2018**, *10*, 215–235. [\[CrossRef\]](#)
64. Marsh, I.C.; Chan, S.W.Y.; MacBeth, A. Self-compassion and psychological distress in adolescents—A meta-analysis. *Mindfulness* **2018**, *9*, 1011–1027. [\[CrossRef\]](#)
65. Sinclair, S.; Norris, J.M.; McConnell, S.J.; Chochinov, H.M.; Hack, T.F.; Hagen, N.A.; McClement, S.; Bouchal, S.R. Compassion: A scoping review of the healthcare literature. *BMC Palliat. Care* **2016**, *15*, 6. [\[CrossRef\]](#)
66. Bluth, K.; Neff, K.D. New frontiers in understanding the benefits of self-compassion. *Self Identity* **2018**, *17*, 605–608. [\[CrossRef\]](#)
67. Neff, K.D. The development and validation of a scale to measure self-compassion. *Self Identity* **2003**, *2*, 223–250. [\[CrossRef\]](#)
68. Gerlach, P.; Eriksson, K. Measuring Cultural Dimensions: External Validity and Internal Consistency of Hofstede's VSM 2013 Scales. *Front. Psychol.* **2021**, *12*, 662604. [\[CrossRef\]](#)
69. Montero-Marin, J.; Kuyken, W.; Crane, C.; Gu, J.; Baer, R.; Al-Awamleh, A.A.; Akutsu, S.; Araya-Véliz, C.; Ghorbani, N.; Chen, Z.J.; et al. Self-Compassion and Cultural Values: A Cross-Cultural Study of Self-Compassion Using a Multitrait-Multimethod (MTMM) Analytical Procedure. *Front. Psychol.* **2018**, *9*, 2638. [\[CrossRef\]](#) [\[PubMed\]](#)
70. Kotera, Y.; Van Laethem, M.; Ohshima, R. Cross-cultural comparison of mental health between Japanese and Dutch workers: Relationships with mental health shame, self-compassion, work engagement and motivation. *Cross Cult. Strateg. Manag.* **2020**, *27*, 511–530. [\[CrossRef\]](#)
71. Strauss, C.; Lever Taylor, B.; Gu, J.; Kuyken, W.; Baer, R.; Jones, F.; Cavanagh, K. What is compassion and how can we measure it? A review of definitions and measures. *Clin. Psychol. Rev.* **2016**, *47*, 15–27. [\[CrossRef\]](#)
72. Kariyawasam, L.; Ononaiye, M.; Irons, C.; Kirby, S.E. A cross-cultural exploration of compassion, and facilitators and inhibitors of compassion in UK and Sri Lankan people. *Glob. Ment. Health* **2022**, *9*, 99–110. [\[CrossRef\]](#)
73. Steindl, S.R.; Yiu, R.X.Q.; Baumann, T.; Matos, M. Comparing compassion across cultures: Similarities and differences among Australians and Singaporeans. *Aust. Psychol.* **2020**, *55*, 208–219. [\[CrossRef\]](#)
74. Arimitsu, K.; Hitokoto, H.; Kind, S.; Hofmann, S.G. Differences in Compassion, Well-being, and Social Anxiety Between Japan and the USA. *Mindfulness* **2019**, *10*, 854–862. [\[CrossRef\]](#)
75. Koopmann-Holm, B.; Tsai, J.L. *The Cultural Shaping of Compassion*; Seppälä, E.M., Simon-Thomas, E., Brown, S.L., Worline, M.C., Cameron, C.D., Doty, J.R., Eds.; Oxford University Press: Oxford, UK, 2017.
76. Wang, H.; Lou, X. The Correlation Between Self-Compassion and Life Satisfaction Varies Across Societal Individualism-Collectivism: A Three-Level Meta-Analysis. *J. Cross-Cult. Psychol.* **2022**, *53*, 1097–1116. [\[CrossRef\]](#)
77. Chio, F.H.N.; Mak, W.W.S.; Yu, B.C.L. Meta-analytic review on the differential effects of self-compassion components on well-being and psychological distress: The moderating role of dialecticism on self-compassion. *Clin. Psychol. Rev.* **2021**, *85*, 101986. [\[CrossRef\]](#)
78. Sinclair, V.M.; Topa, G.; Saklofske, D. Personality Correlates of Compassion: A Cross-Cultural Analysis. *Mindfulness* **2020**, *11*, 2423–2432. [\[CrossRef\]](#)
79. Ukil, M.I.; Almashayekhi, A.; Ullah, M.S. Feeling compassion and responsible but not starting a social venture: Role of empathy and moral obligation in social entrepreneurial intention. *Soc. Bus. Rev.* **2024**, *19*, 132–154. [\[CrossRef\]](#)
80. Corrigan, P.W.; Watson, A.C. Understanding the impact of stigma on people with mental illness. *World Psychiatry* **2002**, *1*, 16–20. [\[PubMed\]](#)
81. Hawkins, M. Compassion in politics. In *How Compassion Can Transform Our Politics, Economy, and Society*; Routledge: London, UK, 2021; pp. 223–237.
82. Paakkanen, M.; Martela, F.; Hakanen, J.; Uusitalo, L.; Pessi, A. Awakening compassion in managers—A new emotional skills intervention to improve managerial compassion. *J. Bus. Psychol.* **2021**, *36*, 1095–1108. [\[CrossRef\]](#)
83. Ashta, A.; Stokes, P.; Hughes, P.; Tarba, S.; Dekel-Dachs, O.; Rodgers, P. The expression of compassion in leadership in intercultural organizational situations: The case of Japanese leaders in India. *Eur. Manag. Rev.* **2024**. [\[CrossRef\]](#)
84. Curley, K.; Kotera, Y. Qualitative Investigation into the Perception towards Compassionate Parenting among Parents of Autistic Children: Cross-Cultural Comparison between the UK and The Netherlands. *Healthcare* **2023**, *11*, 1199. [\[CrossRef\]](#)
85. Scott, B.A.; Amel, E.L.; Koger, S.M.; Manning, C.M. *Psychology for Sustainability*, 5th ed.; Routledge: London, UK, 2021; p. 430.

86. Romano, A. *Encyclopedia of Violence, Peace, and Conflict*; Academic Press: London, UK, 2022; pp. 451–458.
87. Kotera, Y.; Newby, C.; Charles, A.; Ng, F.; Watson, E.; Davidson, L.; Nixdorf, R.; Bradstreet, S.; Brophy, L.; Brasier, C.; et al. Typology of Mental Health Peer Support Work Components: Systematised Review and Expert Consultation. *Int. J. Ment. Health Addict.* **2023**. [[CrossRef](#)]

**Disclaimer/Publisher’s Note:** The statements, opinions and data contained in all publications are solely those of the individual author(s) and contributor(s) and not of MDPI and/or the editor(s). MDPI and/or the editor(s) disclaim responsibility for any injury to people or property resulting from any ideas, methods, instructions or products referred to in the content.