ON THE ETHICS OF MINDFULNESS-BASED INTERVENTIONS

Howard Ruan

Abstract

Since the introduction of mindfulness-based stress reduction in 1979, secular mindfulness has risen in popularity and used in many settings. This paper explores the ethics of mindfulness-based interventions (MBIs) in light of the contention that secular mindfulness is a misappropriation of Buddhist practice. This paper examines the presumed synonymity between traditional Buddhist mindfulness and secular mindfulness, emphasizing issues of conceptual integrity, postmodern secularism, and modernist globalization. The paper argues, finally, that the two constructs require redefinition.

Since Jon Kabat-Zinn developed his mindfulness-based stress reduction program in 1979, secular mindfulness has risen in popularity as a therapeutic technique deployed for the management of adverse psychosomatic phenomena. This paper explores recent debates about the ethics of mindfulness-based interventions (MBIs) given what some call its misappropriation of Buddhist practice. It asks: what constitutes the “right” ways of practicing mindfulness, and on what grounds are such arguments made? I first examine some of the arguments for and against the presumed overlap of traditional Buddhist and secular mindfulness. I then examine some of the framing issues embedded in the confusion between them, paying attention to conceptual integrity, postmodern secularism, and modernist globalization. Through my exploration, I contend that the debate mistakenly assumes that “Buddhist mindfulness” and “secular mindfulness” are synonymous, and that a generative dialogue might emerge from more precise definitions of these two practices.

At the core of the debate is a concern that the scientific rendering of mindfulness may entail a misappropriation of Buddhist practices that traditionally involve an integrated soteriological framework of ethical virtues (Monteiro, Musten, & Compson, 2015). Kabat-Zinn writes, “Mindfulness means paying attention in a particular way: on purpose, in the present moment, and nonjudgmentally” (as cited in in Purser

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& Millilo, 2015). For Buddhists, however, meditation (under which mindfulness is merely one type of practice) is not reducible to a single technique nor an isolated or even relevant aspect for all adherents of the faith (Faure, 2009).

Monteiro, Musten, and Compson (2015) argue that though traditional Buddhist and contemporary secular perspectives vary, they nonetheless share the common goal of reducing suffering in the world. Purser (2015) claims that contemporary mindfulness implicitly criticizes traditional Buddhists and avoids the crucial issue of “mystification”—the presumed link between Buddhist practice and secular mindfulness. By pointing out the contemporary mindfulness movement’s assumption that the essence of the Dharma (the teachings of the Buddha) can be found in a single practice, Purser exposes tensions present not only in the mindfulness literature but also in the Buddhist tradition. The social history of Japanese Sōtō Zen Buddhism, for example, shows that practices resembling Kabat-Zinn’s mindfulness are not representative of the tradition as a whole, and that such meditative practices were overshadowed by ritual and magical priorities (Williams, 2004). To assume that the constructs of “Buddhist mindfulness” and “secular mindfulness” contain the same content is to miss much larger historical and cultural contexts that frame the debate in its current form.

To limit our scope, we should note that Kabat-Zinn’s formulation of mindfulness is informed by his training by Zen Buddhist teachers, a sect that, particularly in its contemporary manifestation, prioritizes meditation as Buddhist practice par excellence (Faure, 2009). What avenues are available for clinicians to utilize a technique that has shown great promise without committing cultural misappropriation? The Theravada Buddhist monk Ajahn Amaro (2015) argues that because the Buddha’s teachings are ultimately pragmatic, there is no real issue here: Buddhists have no exclusive proprietary rights to mindfulness, and clinicians delivering MBIs should feel comfortable sharing Buddhism’s pragmatic ethics as a potential resource with clients. To ensure that holistic well-being is sustainable beyond short-term symptomatic relief, practitioners could use traditional Buddhist concepts (like generosity) to improve and extend the effects of interventions, but the ethics of incorporating traditional Buddhist morality into MBIs is a complex problem (Monteiro, Musten, & Compson, 2015). In contrast, Gordon et al. (2015) rehearse the extant argument that if secular mindfulness is deficient in its authenticity, then traditional Buddhism can offer a (superior) corrective. Gordon et al. critique this argument, stating that the Buddha himself employed plural methodologies of liberation, and that such diversity was intentionally unified under the mission of tailoring practice for the sake of enlightenment. A singular, unequivocally “true” method within Buddhism cannot be found. Therefore, it can be argued that secular mindfulness is not necessarily less robust or less authentic but can be interpreted as yet another expression of the pragmatism of the Buddha’s program.

Indeed, to argue against secular mindfulness because there is a “right” way to practice mindfulness, or that Buddhism “owns” mindfulness practice, is to possibly violate the spirit of certain fundamental Buddhist principles. Marx (2015) shows that secular mindfulness’s dis-identification with Buddhism is validated under the purview of upāya, or skillful means. Under this doctrine, a truth can manifest in different ways according to the contexts of the audience in order to deliver appropriate and effective medicine. This interpretation can be pushed even further by referral to another Buddhist principle: the tenet of anātman, or non-self (the lack of inherent, stable identity) guarantees that no primordial standard or truth can be found, and thus no “right mindfulness” can be validly discovered. For Marx (2015), the preservation of conceptual integrity would entail the preservation of Buddhism’s soteriology—that of the total transformation of our sense of self and the world in order to reduce suffering—but for the Buddhist tradition to lay exclusive claim would be to compromise the accessibility of a practice that has been adapted according to upāya for contemporary needs. Thupten (2019) argues for a particularly strong distinction: that contemporary mindfulness is a new phenomenon, and that as it concerns scientific research, it is morally neutral or independent of ethics and compassion. He is careful to state that the relationship between mindfulness and ethics is nonetheless important but instead relocates it to the domains of culture and the humanities.

Demanding that Buddhism reclaim mindfulness as its property may do more harm than good. As Lindahl (2015) argues in response to Monteiro, Musten, and Compson (2015), clinging to “Right Mindfulness” (or traditional mindfulness within the Buddha’s Eightfold Path, his program for attaining enlightenment) may jeopardize the continued use of this practice in secular settings. Because such professional ethics require informed consent of clients to participate in treatment, explicitly (re)infusing secular mindfulness with religious components may render ineffective or problematic a therapy that otherwise appears to be highly effective and popular. If secular mindfulness were to be made ethically unavailable by a fight over rightful ownership, then it can be argued that it would go against the heart of the Buddha’s teaching to make inaccessible a practice that has spoken to the needs and demands of today’s audience. There is concern that without Buddhist ethics, mindfulness is reduced to symptomatic relief or, worse, a means-end relationship that may reinforce the sense of self (in contradiction with Buddhist teachings of non-self).
But mindfulness practice does not occur in an ethical vacuum. Any field of discipline employing mindfulness techniques must navigate respective codes of professional ethics as well as individualized moral worldviews of clients. Even if MBIs do not immediately function according to a religious ethical framework, practitioners nonetheless function according to networks of moral systems (Krägeloh, 2016). Thus, practitioners should provide guidance and reinforce the integration of MBIs with clients’ personal moral frameworks. In order to meet the needs of a modern Western public that has become increasingly secular, it may be necessary to appeal to personalized moralities and ethics rather than traditional religious frameworks to legitimate and provide religiously-inflected therapies. Sun (2014) suggests that this appeal was the point of Kabat Zinn’s recontextualization of mindfulness practice—oversimplification was a strategic and necessary move in order to reframe Buddhist practice to be more commonsensical and culturally acceptable for mainstream medical care and the American public. Purser and Milillo (2015), however, argue that “denatured” mindfulness is no more than a privatized self-help technique that can potentially reproduce oppressive and unequal power structures. Secular mindfulness, denatured of its religious-ethical origins, they argue, does not point toward an investigation of structural forms of suffering and questions of liberative justice.

Conversely, Palitsky and Kaplan (in press) argue for a pluralistic approach that would implement a religion-informed dissemination of MBIs, stating that the practitioner’s pre-determination of the relevance of religion to MBIs or avoidance of addressing religion at all may be to the detriment of client autonomy and intervention experience. The very fact of mindfulness’s religious heritage for both client and practitioner is a potential determinant of the efficacy of MBIs. Considering the prevalence and range of mindfulness-influenced therapies such as mindfulness-based stress reduction, mindfulness-based cognitive therapy, dialectical behavior therapy, acceptance and commitment therapy, and more, it is incumbent upon practitioners to exercise critical reflexivity regarding the contexts of mindfulness in relation to clients’ needs, worldviews, and culture (Thompson & van Vliet, 2018). Practitioners need skill in cultural humility, or more specifically in this case, religious or spiritual sensitivity in the navigation of religious-secular constructs.

That secular mindfulness accords with the doctrine of अनलम in the Buddhist tradition does not quash the difficulties of conceptual integrity across different constructs. It is important to emphasize that a movement away from religious ethics to secular ethics is not a movement toward value neutrality. As Panaïoti (2015) argues, there is “a lingering attachment to the metaphysics of robust selfhood in the psychological sciences”—a metaphysics that is diametrically opposed to the Buddhist metaphysics of non-self. Indeed, the fear of the supposed traditional Buddhist is that a teaching of non-self could be mobilized to strengthen a sense of self. But if strengthening a sense of self is required to reduce suffering, then this paradox may be where Buddhism and the psychological sciences can find ground for mutual learning. Even within the sūtra genre of Buddhist religious literature, we can find internal disagreements and creative re-workings of the non-self principle, particularly in the polemical discourse of the Mahāyāna Mahāparinirvāṇa Sūtra, which argues for the reality of a permanent, unchanging self. Taking the psychological and cognitive dimensions of Buddhism on its own terms may aid secular psychological sciences with greater definitional precision, and it may benefit the coherence of cognitive and/or behavioral approaches.

In their literature review, Hanley et al. (2016) find that mindfulness studies suffer from standard criticisms of scientific inquiry, such as methodological flaws and inadequate sample diversity (see Baer, 2003). MBI-specific gaps include a need for greater clarity of conceptual and operational definitions, better differentiation between mindfulness meditation and mindfulness-based interventions, attrition factors, adverse effects, and more. Thus a more beneficial and productive interpretation is available and the soteriological mission of Buddhism can be enhanced by a mutual dialogue with the psychological sciences in hypothesizing, testing, and theorizing increasingly appropriate and effective methods by which people can be liberated from suffering. But this would also require that evidence-based practices of the psychological sciences are equally open to the non-positivist and non-rationalist methods of healing housed within the diverse Buddhist tradition.

Part of the difficulty in ascertaining the boundaries, relationships, and functions between mindfulness as a religious practice and mindfulness as a secular adaptation stems from the culturally-specific Western binary of “religious” vs. “secular” becoming outdated (Compson, 2017). To frame mindfulness within this dichotomy is to take on a modernist attitude of reification that has since become irrelevant. Echoing Plato’s Euthyphro, Compson (2017) asks what makes a religious value religious rather than just a value. She ultimately comes down on value ambiguity and urges for a “postmodern, postsecular openness to interplay and dialogue between narratives” that is capable of inclusivity and generativity.

That we have difficulty differentiating, for example, what “religious” or “spiritual” means may be part of the greater ambiguity that is the relationship between religious and secular modes of being. Frisk (2012) argues that post-secularity is a much more appropriate and more meaningful term; as a result of such postmodern deconstruction of
categories and values, mindfulness is a “hybrid product,” a product of varying interpretations that may or may not explicitly reference religion and which serves some secular function. Any question about the status of mindfulness is ultimately a question about the status of religion and postmodern secularism.

We must also consider the role of globalization in the translation of cultural practices into Western psychotherapeutic techniques. Schedneck (2013) historically and culturally situates the decontextualization of Asian global religious practices in their adherence to modern, positivist values. In order for mindfulness to be universalized as a global practice—in order for the Buddha’s teaching to be accessible—it had to undergo decontextualization. As with any critical approach, we must ask: accessible for whom? This answer cannot easily be laid at the boots of a Western colonialist regime. Mindfulness, as we have inherited it, is a construct that has been carefully crafted by both Asians and non-Asians in response to historical circumstances and to meet the needs of respective audiences; sometimes to mobilize for and sometimes to revolutionize against the ideologies of empire, science, and modernity (Schedneck, 2013; Lopez Jr., 2008). Because of globalization tends to decontextualize particular cultural practices, it is not so much that the question of “authenticity” or “ownership” is irrelevant, but that there is no longer some “authentic” origin to locate. If this is so, we may need to begin asking different questions or defining different problems.

We must take care to not presume that we now occupy a value-free zone. Sharf (2015) remarks how the anthropologist Obeyesekere did not view hopelessness as a depressive disorder but rather as the sign of a good Buddhist whose salvation is linked to seeing hopelessness as the nature of the world. What makes for mental health or an aspirational state of being in the Buddhist sense is not necessarily in agreement with the ideal of contemporary mindfulness practice. In other words, we cannot assume that the constructs of “Buddhist mindfulness” and “secular mindfulness” share the same conceptualizations of problem, method, and solution. But here the conversation can restart at this intersection of Buddhism and science.

Intersections between disciplines occur, Christian theological ethicist Gustafson (1996) tells us, “whether one wishes to admit it or not” and academic honesty and pragmatic utility urges practitioners to grapple with the variant sources from which valuations, descriptions, and prescriptions are derived and from which epistemological and ontological standards are established. The moral psychology of (one kind of) Buddhism argues that the deconstruction of our sense of self and a whole-hearted recognition of the impermanence of all phenomena is the very key to well-being, and we must put this in direct conversation with the veiled valuations of Western psychology that elevates a fortified, integrated, and stable sense of self as the crux of well-being. Rather than engage with simplified, sanitized, and outdated projections of the promises that Buddhism and science offer to themselves and to each other, we must open the conversation back up to internal complexities, ambiguities, and pluralisms to ensure that our definitions, assessments, and interventions are ethically sound and consistent across disciplines.

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HOWARD RUAN is an AM/MDiv joint degree third-year student at the University of Chicago School of Social Service Administration and the Divinity School. At SSA, they are pursuing the clinical track and the Graduate Program in Health Administration and Policy. At the Divinity School, they have concentrated on the intersections of Buddhist ministry, spiritual care, philosophy of religion, and religious ethics. Howard is a lay-ordained practitioner in the Soto Zen tradition. Prior to beginning graduate studies, they worked as the Book Donation Manager at Open Books, a literacy non-profit in Chicago. They hold a BA in the Humanities from Shimer College. Howard’s practice and research interests center around religion and spirituality, mental health, elder care, and substance use. Alongside hopes for a career in hospital social work and/or chaplaincy, Howard is interested in rigorously challenging and refining theory to model and reflect compassionate, just practice.

FRAMING AND AGENDA SETTING FOLLOWING THE MASS SHOOTING TERROR ATTACK IN CHRISTCHURCH, NEW ZEALAND

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Abstract

Despite thousands of gun-related deaths and injuries in the last decade, the United States federal government has yet to enact comprehensive gun reforms. Meanwhile, New Zealand recently experienced the deadliest mass shooting in its history, and within one week, Prime Minister Jacinda Ardern had announced major reforms. This paper analyzes the Prime Minister’s response and her power in shaping the discourse of the event in the immediate aftermath of the shooting. It focuses on her public statements in the six days that followed the event, and analyzes them with the concepts of framing and agenda setting.

In 2008, my high school in a commuter town outside New York City was put on lockdown because of a potential shooter. For three hours I hid in a library closet with six other students and a librarian. We had no cellphones and no idea what was happening outside. While we had experienced post-9/11 anthrax and bomb scares, this was our first gun-related lockdown and it has haunted me since. While no one was hurt that day, I now see that I was coming of age in an epidemic of mass shootings.

America has an enormous gun problem, which is a complex tangle of interconnected social, political, and economic issues. On the policy side, federal legislation related to guns is weak and riddled with loopholes; state legislation varies widely; lobbyists fund politicians (Gambino, 2018); and an 18th century war-time constitutional amendment is the principal argument for unrestricted access to 21st century technology. The results of this complex tangle are clearer to see. Each year some 136,000 people are shot in the United States (Giffords Law Center, 2019). The firearm homicide rate in 2015 was 25 times higher than the rate in 28 high-income

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